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ABSTRACT

A ninth grade unit on tobacco, drugs, and alcohol is presented in this curriculum guide for teachers. The introductory section states general objectives and specific knowledge facts for each of the three study areas. Also, skills and attitudes to be developed, general motivating activities, and teaching hints for slow and rapid learners are included. Individual units enumerate basic concepts and suggest teacher and student materials, audio visual aids, motivating questions, and activities to develop the concepts. An appropriate glossary of terms and additional teacher information and ideas supplement each study area. Culminating activities and teacher-pupil evaluation of knowledge, skills, and attitudes for the entire unit conclude the guide. Sources of information and a bibliography are listed. This work was prepared under an ESEA Title III contract. (BL)

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Great Falls Public Schools
Great Falls, Montana

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TOBACCO, DRUG, AND ALCOHOL UNIT

NINTH GRADE

ESEA TITLE III I.M.C. PROJECT 5115

SE 012 100

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Great Falls Public Schools
Great Falls, Montana

TOBACCO, DRUG, AND ALCOHOL UNIT

NINTH GRADE

Instructional Materials Center
ESEA Title III Project 68-05115-0
Robert C. Jewell, Director

Great Falls Public Schools
Great Falls, Montana

TOBACCO, DRUG, AND ALCOHOL UNIT

NINTH GRADE

Prepared by:
Edward Spragg - Tobacco
Robert Roach - Tobacco
William McKinley - Drugs
Karen Mitchell - Drugs
Earl Spong - Alcohol

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INTRODUCTION

Young people today are surrounded by great pressures and worldly
difficult for some to act in a conventional manner.

At this moment, no one knows just how extensive drug abuse by you
that the situation is growing. It is not limited to slum areas; it ca
level, ethnic origin, intellectual or educational attainment, religiou
of drug abuse is a fraternity of the hopeless: anyone can join. Educ
headstart.

We are now at a time when we must present the facts and eliminate
that engulf the minds of students.

Pupils must be motivated to want to receive correct information.
an attitude where abstinence is the "in" thing.

The same problem may be viewed from many different vantage points
men may legitimately differ in their views. A wide variety of differ
and reflection.

Education is the key to prevention - and truth concerning misuse
way prevention can be accomplished.

Facts and positive motivation are what young people need to help
day face the pressure of "going along" with the crowd.

"The federal funds in this project were provided by ESEA Title I
Secondary Education Act is designed to encourage the development of n
tions in education through exemplary programs and to supplement exis

INTRODUCTION

ay are surrounded by great pressures and worldly changes that all too often make it
act in a conventional manner.

no one knows just how extensive drug abuse by youngsters may be. But authorities agree
growing. It is not limited to slum areas; it can occur anywhere...without reference to economic
intellectual or educational attainment, religious identity or social situation. The world
aternity of the hopeless: anyone can join. Education must be a part of overcoming this

time when we must present the facts and eliminate the ignorance, misconceptions, and fallacies
of students.

otivated to want to receive correct information. Every possible attempt must be made to create
tinence is the "in" thing.

may be viewed from many different vantage points, to enable students to realize that honest
differ in their views. A wide variety of different kinds of sources, encourages discussion

key to prevention - and truth concerning misuse of tobacco, drugs, and alcohol is the best
accomplished.

ive motivation are what young people need to help them make a sound decision should they one
of "going along" with the crowd.

nds in this project were provided by ESEA Title III. Title III of the Elementary and
Act is designed to encourage the development of new ideas, to demonstrate worthwhile innova-
hrough exemplary programs and to supplement existing programs."

OBJECTIVES

GENERAL

To teach the facts about tobacco, alcohol, and drugs so that the student will be able concerning their use.

To correlate these facts with health studies.

KNOWLEDGE

TOBACCO

General

Smoking is usually started during the teenage years for social reasons.

Specific

Teenagers smoke for a variety of reasons.

1. Status
2. Gang influence
3. Parental influence
4. Relaxation
5. Rebellion

Cigarette smoking and low academic achievement are oftentimes synonymous.

Advertising plays an important role in influencing teenagers to smoke.

Advertising portrays smoking as being glamorous.

Reducing the amount a person smokes can be helpful.

The monetary returns from smoking are enormous.

There are many losses attributed to smoking.

OBJECTIVES

GENERAL

cco, alcohol, and drugs so that the student will be able to make wise decisions

health studies.

KNOWLEDGE

during the teenage years for social reasons.

ety of reasons.

academic achievement are oftentimes synonymous.

tant role in influencing teenagers to smoke.

ng as being glamorous.

on smokes can be helpful.

smoking are enormous.

ributed to smoking.

OBJECTIVES (continued)

The Federal government is beginning to take a critical look at the tobacco indust

The nation as a whole is taking a new look at smoking, and programs of education

DRUGS

General

To review the physiological and psychological effects of drug abuse.

To review the legal aspects of drug abuse.

To gain an understanding to rehabilitation of the drug abuser.

To present the history of drugs and drug abuse.

To present the facts and eliminate the ignorance and misconception that engulf t

To gain an understanding of the effect of drugs, (stimulants, depressants, hallu
nervous system and the ultimate resulting effect on the individual's life and hi
family, his peers, his community and society.

To develop an attitude of abstinence.

Specific

To present divergent, conflicting views on the drug problem.

To give as many perspectives and dimensions on the problem as time permits.

To present articles on a variety of reading levels, in order to appeal to studen
levels.

To present material that deals with real people involved in situations of concer

To present activities to involve students to consider further the issues embedde

To make the materials relevant to the student's needs.

OBJECTIVES (continued)

is beginning to take a critical look at the tobacco industry.

is taking a new look at smoking, and programs of education are being instituted.

ogical and psychological effects of drug abuse.

spects of drug abuse.

ing to rehabilitation of the drug abuser.

y of drugs and drug abuse.

and eliminate the ignorance and misconception that engulf the minds of pupils.

ing of the effect of drugs, (stimulants, depressants, hallucinogens and narcotics) on the
e ultimate resulting effect on the individual's life and his relationship to himself, his
s community and society.

e of abstinence.

conflicting views on the drug problem.

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n a variety of reading levels, in order to appeal to students of many different ability

hat deals with real people involved in situations of concern to them.

s to involve students to consider further the issues embedded in the problem.

s relevant to the student's needs.

OBJECTIVES (continued)

ALCOHOL

General

To gain an understanding of the terms used when discussing alcohol, the charac alcoholic, alcohol and its relation to adolescents, the possible causes of alc the various laws pertaining to the use or abuse of alcohol.

Specific

Alcohol is produced by two different methods: fermentation and distillation.

The biological effects of alcohol on the body organs are numerous.

Absorption of alcohol is direct because it does not have to be digested.

Cirrhosis of the liver is about six times as common in heavy drinkers as in th

The four routes of alcohol excretion are urine, breath, perspiration, and in t

Oxidation is the process by which over 90 percent of the alcohol in the body i

Each individual burns alcohol at his own rate.

Drinking patterns in the United States show variation depending upon sex, educ location of habitat and family background.

The number of heavy drinkers in the United States is estimated to be ten perce

The symptoms of alcoholism may be divided into three stages: the early stage, stage.

The possible causes of alcoholism are numerous, including both physiological

The treatment of alcoholism is many sided and varies with the individual.

Drinking may have a significant effect upon the family life.

OBJECTIVES (continued)

of the terms used when discussing alcohol, the characteristics and development of an s relation to adolescents, the possible causes of alcoholism, and an introduction into ng to the use or abuse of alcohol.

o different methods: fermentation and distillation.

alcohol on the body organs are numerous.

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about six times as common in heavy drinkers as in the average population.

l excretion are urine, breath, perspiration, and in the stools.

by which over 90 percent of the alcohol in the body is disposed.

ohol at his own rate.

United States show variation depending upon sex, education, socio-economic status, amily background.

ers in the United States is estimated to be ten percent of the population.

m may be divided into three stages: the early stage, the middle stage, and the late

coholism are numerous, including both physiological and psychological causes.

sm is many sided and varies with the individual.

ficant effect upon the family life.

OBJECTIVES (continued)

Some crimes are associated with alcoholism.

There are various reasons given why teenagers drink alcoholic beverages in the United States.

The various laws pertaining to the use of alcohol are set up by each state.

D

OBJECTIVES (continued)

SKILLS

To develop the ability to discriminate between fact and fiction.

To develop the ability to critique audio-visual and printed materials with ob

To differentiate between use, misuse, and abuse of alcohol, tobacco, and drug

To promote understanding of the scope and nature of their use and abuse on fa

To increase the knowledge of federal and state regulations regarding the use

To develop a sense of personal worth and integrity.

To exercise control as well as freedom of verbal and non-verbal expressions o

To increase the self-awareness of mental and physical conditions, feelings, a

To develop decision-making skills.

To develop the appreciation of and respect for the decisions of others.

To recognize that the abuse of alcohol, tobacco, and drugs is a medical and s

To take notes.

To promote discussion.

To promote library usage.

OBJECTIVES (continued)

SKILLS

discriminate between fact and fiction.

critique audio-visual and printed materials with objectivity.

se, misuse, and abuse of alcohol, tobacco, and drugs.

f the scope and nature of their use and abuse on family and community life.

of federal and state regulations regarding the use of alcohol, tobacco and drugs.

onal worth and integrity.

l as freedom of verbal and non-verbal expressions of emotions and behavior.

eness of mental and physical conditions, feelings, and sensations.

g skills.

on of and respect for the decisions of others.

se of alcohol, tobacco, and drugs is a medical and sociological problem.

OBJECTIVES (continued)

ATTITUDES

To develop an understanding of his responsibility to himself, to his family and t

To develop an appreciation for maintaining optimum health and health habits.

To develop and understand the effect of alcohol, tobacco, and drugs on the way pe

To develop a sensitivity to problems regarding the use of alcohol, tobacco, and d

To develop a desire to seek information on both sides of the problem of the use o

To develop a desire to abstain and pride in abstinence in the use of alcohol, tob

To understand their personal needs and how they can be fullfilled without resorti

To be able to recognize peer pressures, and react to them with their own personal

TEACHER ATTITUDES

Present facts, not opinions, prevent students from turning you off.

Do not fake answers, be prepared to say you don't know. These questions often ma

Avoid panic.

Keep lines of communication open.

Avoid "scare" techniques.

Avoid creating an atmosphere of distrust and suspicion.

Avoid stereotyping users or abusers.

Approach changing attitudes through the subtle and unconscious approach.

Avoid "head on attack" of an attitude you want to change.

OBJECTIVES (continued)

ATTITUDES

ng of his responsibility to himself, to his family and to his community.

for maintaining optimum health and health habits.

the effect of alcohol, tobacco, and drugs on the way people live.

o problems regarding the use of alcohol, tobacco, and drugs.

k information on both sides of the problem of the use of alcohol, tobacco, and drugs.

stain and pride in abstinence in the use of alcohol, tobacco,and drugs.

al needs and how they can be fullfilled without resorting to alcohol, tobacco, and drugs.

eer pressures, and react to them with their own personal development as a guideline.

TEACHER ATTITUDES

ns, prevent students from turning you off.

repared to say you don't know. These questions often make good rapid learner projects.

on open.

ere of distrust and suspicion.

or abusers.

es through the subtle and unconscious approach.

an attitude you want to change.

MOTIVATING ACTIVITIES

TOBACCO

Invite a resource person from the Cancer Society or Heart Association to tell some
Ask him to tell only enough of the highlights to stimulate interest.

Encourage students to talk about what they already know about the effects of tobac
collection of newspaper and magazine articles relating to smoking. Ask them to an
made by cigarette advertisers.

Ask students about some of the good habits they have; also encourage their telling
like to break. Ask, "Are habits easily broken?" Show a film concerned with cigar

Encourage students to tell about an anti-smoking commercial that they have recentl

DRUGS

Have students bring magazine and newspaper clippings and discuss with the class.

Analyze drug advertisements.

Invite speakers - law enforcement, druggists, doctors, ex-abusers - to talk to the

Write poems and songs about drug abuse.

Analyze hit songs about drug abuse.

Gather and list terms relevant to students.

"Bingo" type game about the effects of drugs.

Make maps and trace the routes of drugs from production to user.

Research reports on various aspects on drug abuse.

Develop stories and programs for news media.

MOTIVATING ACTIVITIES

the Cancer Society or Heart Association to tell some of the effects of tobacco.
f the highlights to stimulate interest.

ut what they already know about the effects of tobacco. Have them make a
gazine articles relating to smoking. Ask them to analyze some of the claims

e good habits they have; also encourage their telling about habits they would
its easily broken?" Show a film concerned with cigarette advertising. (e.g. Phony Folks)

ut an anti-smoking commercial that they have recently seen on TV.

and newspaper clippings and discuss with the class.

ment, druggists, doctors, ex-abusers - to talk to the class.

rug abuse.

abuse.

t to students.

ffects of drugs.

s of drugs from production to user.

spects on drug abuse.

for news media.

MOTIVATING ACTIVITIES (continued)

ALCOHOL

Administer the pre-test on alcohol prior to conducting the study of this unit. Fo
the unit study, readminister the test and use the "Fact Sheet" to correct or modif

Conduct discussion groups regarding the causes, treatments and prevention of alcoh
should be portrayed toward the alcoholic.

Assign research papers regarding such topics as cirrhosis of the liver, the distil
drugs used in treating alcoholism, institutions utilized in the treatment of alcoh

Assign a group of students to interview a member of the local police department co
alcohol-related automobile and pedestrian accidents.

Using recent statistics from newspapers and/or magazines, instruct students to dev
illustrating such topics as the dollar costs of tax-supported facilities for treat
per capita on various alcoholic beverages, alcoholism rates.

Anatomical diagrams of the motor control centers of the brain may be made by the s
slurred speech and unsteady gait are among the first overt signs of excessive drin

A mechanically inclined student or teacher could construct a working model or mock
Drunkometer to help students obtain a visual image of the instruments used to test
in the blood.

Bulletin boards may be constructed and changed each day by selected students regar
this unit.

Cartoons and comic strips may be created by students regarding the dangers of taki
of thoughtless showing off.

Following completion of this unit, assign the creation of a crossword puzzle regar

A sociodrama, or an unrehearsed dramatization of a problem situation may be applie
such as: a typical teenage scene in which three couples gather at a friend's home
to listen to some records and have refreshments. Alcoholic drinks are served; som
accept them, but others do not wish to drink. Three basic questions involved in t

MOTIVATING ACTIVITIES (continued)

ohol prior to conducting the study of this unit. Following the completion of
he test and use the "Fact Sheet" to correct or modify the students' answers.

rding the causes, treatments and prevention of alcoholism and attitudes which
alcoholic.

ng such topics as cirrhosis of the liver, the distillation and fermentation processes,
ism, institutions utilized in the treatment of alcoholism, and Alcoholics Anonymous.

interview a member of the local police department concerning the problem of
pedestrian accidents.

ewspapers and/or magazines, instruct students to develop charts, graphs or tables
e dollar costs of tax-supported facilities for treating alcoholics, money spent
c beverages, alcoholism rates.

or control centers of the brain may be made by the students to help visualize why
it are among the first overt signs of excessive drinking.

t or teacher could construct a working model or mock-up of an Alcometer and
otain a visual image of the instruments used to test the alcohol concentration

cted and changed each day by selected students regarding the various facets of

be created by students regarding the dangers of taking a dare or the risks

nit, assign the creation of a crossword puzzle regarding alcohol for the whole class.

d dramatization of a problem situation may be applied to some aspect of this unit
ene in which three couples gather at a friend's home after a high school dance
have refreshments. Alcoholic drinks are served; some of the group are eager to
wish to drink. Three basic questions involved in this situation are:

Why are some of the group eager to drink?
Why do some of the group prefer not to drink?
How can a drink be refused gracefully?

7

TEACHING HINTS FOR SLOW AND RAPID LEARNERS

SLOW LEARNERS

Brief assignments from pamphlets - write the effects of each drug, the alcohol

Present skits associated with alcohol, drugs, and tobacco

Make bulletin boards on each and how they are abused.

Make posters to prevent abuse, to be posted around the school.

Encourage slower students to participate in group activities.

Have the students collect magazine and newspaper articles related to alcohol, t

Use simple crossword puzzles, tests, and worksheets to stimulate success.

RAPID LEARNERS

Research the history of alcohol, tobacco, and drug abuse.

Report on crimes caused by drugs and alcohol abuse in our city, state, or natio

Survey students in the school, asking the basic questions: Do you ever use dru
why not? Summarize and evaluate the findings.

Do research concerning the problems and control of abuse in other nations of th

Experiment with rats or mice and the effects of excess use.

Interview a legislator about the creation of laws controlling alcohol, tobacco,

Make models of a Gladstein laboratory or a distillation still.

Research the abuse problem in your own school and city.

Present facts about alcohol, tobacco, and drugs, to the class.

Have the faster learners teach the slow learners about selected aspects of alco

TEACHING HINTS FOR SLOW AND RAPID LEARNERS

om pamphlets - write the effects of each drug, the alcohols, and tobacco.

ated with alcohol, drugs, and tobacco

on each and how they are abused.

ent abuse, to be posted around the school.

dents to participate in group activities.

llect magazine and newspaper articles related to alcohol, tobacco, and drugs.

puzzles, tests, and worksheets to stimulate success.

of alcohol, tobacco, and drug abuse.

sed by drugs and alcohol abuse in our city, state, or nation.

he school, asking the basic questions: Do you ever use drugs, tobacco, and alcohol? Why or
and evaluate the findings.

ing the problems and control of abuse in other nations of the world.

s or mice and the effects of excess use.

tor about the creation of laws controlling alcohol, tobacco, and drugs.

adstein laboratory or a distillation still.

problem in your own school and city.

alcohol, tobacco, and drugs, to the class.

rners teach the slow learners about selected aspects of alcohol, tobacco, and drugs.

TOBACCO

Concepts	Teacher Materials
I. Many habits are started during the teenage years. One serious habit is that of smoking. This unit will be concerned with the social aspects of smoking.	Pamphlet: "Your Teenage Children And Smoking" Department of Health Education & Welfare #423
A. People begin smoking for many varied reasons	"Parents, Teachers, Students - Take a Look at Cigarettes and the Schools" N.E.A. #052-081854
1. Peer influence	"Teenagers and Smoking"
a. Gang b. Group c. Status d. Academic achievement	"The Teenager Looks at Cigarette Smoking" pp. 7,8 "Smoking, Health and You" pp. 8,9 "The Teenager Looks at Cigarette Smoking" pp. 6,7

	Teacher Materials	Student Materials
he t l	Pamphlet: "Your Teenage Children And Smoking" Department of Health Education & Welfare #423	Cigarettes - America's No. 1 Public Health Problem. Public Affairs pamphlet #439, pp. 1-10
ny	"Parents, Teachers, Students - Take a Look at Cigarettes and the Schools" N.E.A. #052-081854	"Smoke Cigarettes - Why?" "To Smoke or Not To Smoke - A Fact Booklet"
	"Teenagers and Smoking"	
	"The Teenager Looks at Cigarette Smoking" pp. 7,8	
t	"Smoking, Health and You" pp. 8,9	
	"The Teenager Looks at Cigarette Smoking" pp. 6,7	

Audio Visual	Motivating Questions	Activi
Film: (Outside source) "Getting Through"	Do you feel the film presented the facts as they appear to you?	Discus
Posters: "Decisions, Decisions, Decisions.." "How Strong is a Habit?"		
Transparency: "But I Don't Want to be One of The Crowd" T-9-1	What are some of the reasons you feel people smoke? a. Teenagers b. Adults	Have c feel t Use th cussio
Film: "The Huffless, Puffless Dragon"	Do you feel that the reasons given by smokers are real and true, or are they attempts to justify one's own habit?	Discus to loo arette
Transparency: "Group Smoking" (Loner, Not Smoking) T-9-2	Do one's peers exert pressures on each other in ways other than smoking, drinking, etc?	Have t on the and th correl
Transparencies: (Status) "Maybe I Look Older" T-9-3A "Big Shot" T-9-3B "My Dear, It Makes Me Look Older" T-9-3C	Do you feel that there is a correlation between smoking and academic achievement?	Use th findin
	Do you feel that the smoker realizes the possible correlation between smoking and poor achievement?	Discus who a
Poster: "This Chimp Is No Chump"	If the correlation exists, does it necessarily mean that all smokers are low academic achievers?	

	Motivating Questions	Activities
	Do you feel the film presented the facts as they appear to you?	Discuss the film "Getting Through"
ecisions.."		
	What are some of the reasons you feel people smoke?	Have class discussion on the reasons they feel teenagers smoke.
One of	a. Teenagers b. Adults	Use the transparencies to bring out discussion on the points presented.
Dragon"	Do you feel that the reasons given by smokers are real and true, or are they attempts to justify one's own habit?	Discuss the problem of teenagers wanting to look and act older - and the part cigarettes play in this problem.
Not	Do one's peers exert pressures on each other in ways other than smoking, drinking, etc?	Have the students compile a fact sheet on the academic standards of the smoker and the non-smokers (try to bring out a correlation between the two)
9-3A	Do you feel that there is a correlation between smoking and academic achievement?	Use the transparency to verify the findings.
ok Older"	Do you feel that the smoker realizes the possible correlation between smoking and poor achievement?	Discuss the various successful people who are or were smokers.
'	If the correlation exists, does it necessarily mean that all smokers are low academic achievers?	

TOBACCO (continued)

Concepts	Teacher Materials	Student Mat
2. Psychological reasons a. Group rejection b. Nervous control c. Rebellion d. Relaxation	"Cigarette Smoking Among High School Students" Reprint from American Journal of Public Health	Pamphlet: "Here i Judge" Ditto: "Why D
3. Parental influence a. Smoking parents b. Non-smoking parents	"Your Teenager and Smoking" pp. 2,3 "Tobacco and Health - A Handbook For Teachers" p. 49 "Parents, Teachers, Students - Take a New Look at Cigarettes and the Schools"	

	Teacher Materials	Student Materials
ns	"Cigarette Smoking Among High School Students" Reprint from American Journal of Public Health	Pamphlet: "Here is the Evidence - You Be The Judge" Ditto: "Why Do Young Adults Start Smoking?"
ents	"Your Teenager and Smoking" pp. 2,3 "Tobacco and Health - A Handbook For Teachers" p. 49 "Parents, Teachers, Students - Take a New Look at Cigarettes and the Schools"	

Audio Visual	Motivating Questions	Activiti
Filmstrip: "Tobacco and Alcohol: The $50,000 Habit" Part II w/record and guide #88 Transparencies: "Relaxing After Meals" T-9-5A "Depressed" T-9-5B "Nervous" T-9-5C "Bored" T-9-5D "Rebellion" T-9-5E "Dieting" T-9-5F	If a person smokes does it mean that he or she is an undesirable person? Many people give relaxation as a reason for smoking - what do you think is in a cigarette that causes this feeling? Are the reasons listed on the ditto valid for today's youth?	Discuss form of of chan Use the stimula reasons Use the on the
Transparencies: "Everybody Smokes, Don't They?" T-9-6A "I Can't Understand It" T-9-6B "Smoking Children - Smoking Parents" T-9-6C Poster: "Like Father, Like Son"	Do students who have smoking parents seem to smoke more or less than those who have non-smoking parents? If not smoking, what other things might a youngster do that is a result of parental influence?	Have st offspri Discuss usually attitud

Motivating Questions	Activities
If a person smokes does it mean that he or she is an undesirable person?	Discuss the fact that nicotine is a form of drug and produces some degree of change to the nervous system.
Many people give relaxation as a reason for smoking - what do you think is in a cigarette that causes this feeling?	Use the transparencies as a guide to stimulate discussion on the psychological reasons for smoking.
Are the reasons listed on the ditto valid for today's youth?	Use the ditto to bring out discussion on the areas covered.
Do students who have smoking parents seem to smoke more or less than those who have non-smoking parents?	Have students do a fact sheet on parents' offspring smoking.
If not smoking, what other things might a youngster do that is a result of parental influence?	Discuss the reasons why parents are usually a strong influence on the attitudes and behavior of their children.

TOBACCO (continued)

Concepts	Teacher Materials	Student M
4. Advertising influence a. Pro b. Con	"Cigarettes - America's No. 1 Public Health Problem" pp. 8-9 "Smoking - The Great Dilemma" pp. 12-14 "Tobacco and Health - A Handbook for Teachers" "Health Hazards of Smoking" pp. 14-15 "The Teenager Looks at Cigarette Smoking" p. 18	"What The Show" Re Ditto: "Adve
II. The habit of smoking if not broken can be reduced substantially enough for the smoker to benefit from it.	"Cigarettes - America's No. 1 Public Health Problem" pp. 10-15	"If You

	Teacher Materials	Student Materials
fluence	"Cigarettes - America's No. 1 Public Health Problem" pp. 8-9 "Smoking - The Great Dilemma" pp. 12-14 "Tobacco and Health - A Handbook for Teachers" "Health Hazards of Smoking" pp. 14-15 "The Teenager Looks at Cigarette Smoking" p. 18	"What The Cigarette Commercials Don't Show" Readers' Digest Reprint Ditto: "Advertising"
ng if not ced sub- for the smoker .	"Cigarettes - America's No. 1 Public Health Problem" pp. 10-15	"If You Want To Give Up Cigarettes"

Audio Visual	Motivating Questions	Activiti
Transparency: "Salem" T-9-7	What influence does the advertising media have on causing or helping to maintain smoking as the nation's leading habit?	Have st of ciga magazin compari
Posters: "Who's Afraid of a Cigarette" "King James" "Charles Lamb" "They Quit Smoking" "The U.S. Government Warns"	What message is each of the posters trying to project?	Bring o was jus it was
	King James and Charles Lamb both lived a long time ago, why do you think their statements are worth considering today?	Discuss Commerc The stu researc adverti compani
Transparency: "We'd Rather Fight Than Switch" T-9-8	Is the message on the physician poster as effective in catching your interest as the ones put out by the cigarette companies?	Discuss Discuss vertis
Posters: "We'll Miss You Baby" "How strong is a Habit?"	What is a habit and how are they acquired?	Discuss ones.

	Motivating Questions	Activities
	What influence does the advertising media have on causing or helping to maintain smoking as the nation's leading habit?	Have students bring to class samples of cigarette ads from the papers and magazines (you will need these to show comparisons and to stimulate interest)
tte"	What message is each of the posters trying to project?	Bring out discussion that even when smoking was just getting a good start, some thought it was worth advertising against.
s"	King James and Charles Lamb both lived a long time ago, why do you think their statements are worth considering today?	Discuss the pamphlet "What The Cigarette Commercials Don't Show" The students may be stimulated to do some research on the effect of commercial advertising being done by the cigarette companies.
	Is the message on the physician poster as effective in catching your interest as the ones put out by the cigarette companies?	Discuss the ditto sheet on advertising. Discuss the question "Is cigarette advertising public deception?"
	What is a habit and how are they acquired?	Discuss habits - good as well as bad ones.

TOBACCO (continued)

Concepts	Teacher Materials	Stu
A. Breaking or reducing the smoking habit	"Smoking - The Great Dilemma" Public Affairs Pamphlet No.36	"Wh Yea
B. There are other benefits to be derived from not smoking.	"Health Hazards of Smoking" p. 16, Roswell Park Inst.	"Ho
		Dit
C. Economics of smoking	"Health Hazards of Smoking" p. 13	
1. Sales 2. Taxes 3. Personal expenditures 4. General 5. Fires	"Tobacco and Health - A Handbook for Teachers" pp. 14-20	Dit
		Dit
		"Sm

Teacher Materials	Student Materials
"Smoking - The Great Dilemma" Public Affairs Pamphlet No.36	"Who Me--Quit Smoking--After All These Years?"
"Health Hazards of Smoking" p. 16, Roswell Park Inst.	"How to Break the Cigarette Habit"
"Health Hazards of Smoking" p. 13	Ditto: "Preventive Measures For Smokers"
"Tobacco and Health - A Handbook for Teachers" pp. 14-20	Ditto: "Life Insurance Aspects of Cigarettes"
	Ditto: "Economic Aspects of Cigarette Smoking"
	"Smoking - It's Up To You"

Audio Visual	Motivating Questions	Act
Film: "The Time to Stop is Now" #1340 Transparency: "Economics" T-9-9 Poster: "Twenty Years of Smoking"	Why are habits so hard to break? Do you feel that these benefits are an added incentive for not smoking? Does it appear that smoking is contributing a great deal of money to the economy? Might it be possible that a smoker spends more on his habit than any other form of personal pleasure? How many of the fires caused by man might be attributed to smoking?	Mak lab sho Res for for Hav smo als Con son Dis the Re da lo an Di sh Re da lo

	Motivating Questions	Activities
	Why are habits so hard to break?	Make a poster with the various habits and label them "Good" and "Bad" - try to show that most habits are not desirable.
1340	Do you feel that these benefits are an added incentive for not smoking?	Research the local insurance companies for information concerning reduced premium for non-smokers.
	Does it appear that smoking is contributing a great deal of money to the economy?	Have the class compute the cost of one year's smoking for: 1 pack per day 2 packs per day also do the same for a period of 20 years.
	Might it be possible that a smoker spends more on his habit than any other form of personal pleasure?	
	How many of the fires caused by man might be attributed to smoking?	Compare the cost of smoking to that of some other habit or entertainment.
		Discuss the things that one could buy with the money spent for cigarettes.
		Research the forest services and obtain data on the number of fires and acres lost in the past due to man's carelessness and oftentimes, smoking.
		Discuss the data presented on the ditto sheet.
		Research the fire department and obtain data on the number of fires caused locally by smoking in the past year.

TOBACCO (continued)

Concepts	Teacher Materials	Student Ma
III. Action is being taken to educate the public about the dangers of smoking.	"Tobacco and Health - A Handbook for Teachers" pp. 60-66 "Health Hazards of Smoking"	Ditto: "Gover Hazard
A. Advertising		Ditto: "Adver "Cigarette Health Pro #439, pp.
B. Education	"Health Hazards of Smoking"	Ditto: "Educa "Preve "Activ

	Teacher Materials	Student Materials
ate of	"Tobacco and Health - A Handbook for Teachers" pp. 60-66 "Health Hazards of Smoking"	Ditto: "Governmental Aspects of Cigarette Hazards" Ditto: "Advertising" "Cigarettes - America's No. 1. Public Health Problem" Public Affairs Pamphlet #439, pp. 10-18
	"Health Hazards of Smoking"	Ditto: "Education" "Preventive Measures for Smokers" "Activities For Students"

Audio Visual	Motivating Questions	Activities
Transparency: "Responsibilities of the Tobacco Industry" T-9-10	Do you feel that all cigarette advertising should be banned? If not all, which and what kind?	Research the data on the a advertisement paper, TV, ra Have class de posters. Go over in cl the pamphlet. report assig class member Discuss the activities t program afte

	Motivating Questions	Activities
bacco	Do you feel that all cigarette advertising should be banned? If not all, which and what kind?	Research the local news media and obtain data on the amount of pro and anti advertisements that are being done (newspaper, TV, radio)
		Have class design and display anti-smoking posters.
		Go over in class the main points listed in the pamphlet. This could also be used as a report assignment by one or a few of the class members.
		Discuss the dittos. Use the ditto on activities to carry on a continuing program after the unit is finished.

IV. TEACHER INFORMATION

The prime reasons for teenage smoking are to look older, feel like a big shot and

Fifty-six percent of the teenage smokers in one research conducted, reported that

Teenagers are 50% more likely to smoke if adults they come in contact with smoke.

Teenagers are 100% more likely to smoke if their parents do not understand them.

Parental rapport is far more important than parental smoking in determining whethe

Girls more than boys feel that smoking is important for social enhancement.

Younger teenagers place great emphasis on smoking for social motivation.

Older teenagers place stress on smoking for psychic tension.

Tobacco is the nation's fifth largest farm crop.

There are over 550 factories in 30 states employing over 88,000 workers.

The Federal Government receives about $3.3 billion in revenue annually from the to

The American public spends about $8.6 billion for tobacco products.

Some life insurance companies are offering reduced premiums for non-smokers.

IV. TEACHER INFORMATION

oking are to look older, feel like a big shot and to be one of the crowd.

smokers in one research conducted, reported that all or most of their friends smoke.

smoke if adults they come in contact with smoke.

o smoke if their parents do not understand them.

ortant than parental smoking in determining whether teenagers will start smoking.

moking is important for social enhancement.

phasis on smoking for social motivation.

smoking for psychic tension.

rgest farm crop.

30 states employing over 88,000 workers.

about $3.3 billion in revenue annually from the tobacco industry.

$8.6 billion for tobacco products.

re offering reduced premiums for non-smokers.

V. GLOSSARY

ammonia	- colorless, pungent gas composed of nitrogen and hydrogen--NH_3; and as a strong cleaning fluid
arsenic	- a silvery-white, brittle, very poisonous chemical; compounds of cides, glass, medicines; arsenic trioxide has no taste
cancer	- a malignant growth of tissue usually ulcerating, tending to spr ill health; a carcinoma or sarcoma
carbon monoxide	- compound of carbon and oxygen; given off in car exhaust; produc of any carbonaceous material
carcinoma	- any of several kinds of epithelial cancer
cardiac	- of or near the heart; relating to the upper part of the stomac
cardiovascular disease	- disease of the vessels of the heart
cell	- small microscopic mass of protoplasm; performs life functions
chronic bronchitis	- inflammation of the bronchial tubes; continuing for a long tim
cilia	- hairlike processes found on many cells; capable of vibratory o
coronary	- pertaining to either of two arteries--right or left--which ari tissues of the heart
coronary artery disease	- disease of the above mentioned arteries
decision	- the act of making up one's mind; a judgement or conclusion rea deciding or settling a question

V. GLOSSARY

pungent gas composed of nitrogen and hydrogen--NH_3; used in fertilizers, medicine, trong cleaning fluid

white, brittle, very poisonous chemical; compounds of it are used in making insecti-ss, medicines; arsenic trioxide has no taste

t growth of tissue usually ulcerating, tending to spread, and associated with general ; a carcinoma or sarcoma

f carbon and oxygen; given off in car exhaust; produced by the incomplete combustion bonaceous material

veral kinds of epithelial cancer

the heart; relating to the upper part of the stomach

the vessels of the heart

roscopic mass of protoplasm; performs life functions

ion of the bronchial tubes; continuing for a long time

processes found on many cells; capable of vibratory or lashing movement

g to either of two arteries--right or left--which arise from the aorta to supply f the heart

f the above mentioned arteries

f making up one's mind; a judgement or conclusion reached or given; the act of or settling a question

GLOSSARY (continued)

depressant	- lowering the rate of muscular or nervous activity
emphysema	- an abnormal swelling of the alveoli of the lungs or the tissue lungs
formaldehyde	- poison frequently used as a disinfectant
habit - custom practice	- an inclination for an action acquired by repetition
hazard	- risk; danger; peril
hydrogen cyanide	- poisonous gas; used in execution of criminals
hydrogen sulfide	- poisonous gas; smell of rotten eggs (Yellowstone Park)
insecticide	- preparation for destroying insects
lung cancer	- cancer of the lungs
maturity	- the state or quality of being developed
nicotine	- $C_{10}H_{14}N_2$ -- colorless, oily poison used as insecticide; stimul
sarcoma	- form of cancer arising from nonepithelial tissue such as conne cartilage or bone
stimulant	- something which arouses or excites--spurs on
tar	- material that stains the inside of a smoker's lungs and acts a sticky brown to black liquid with a pungent odor; obtained by of wood, peat, shale; tars are produced of hydrocarbons and th preserving surfaces and organic compounds
tobacco	- products such as cigars, cigarettes, and snuff prepared from t which belongs to the nightshade family

GLOSSARY (continued)

rate of muscular or nervous activity

welling of the alveoli of the lungs or the tissue connecting the alveoli of the

ntly used as a disinfectant

n for an action acquired by repetition

peril

; used in execution of criminals

; smell of rotten eggs (Yellowstone Park)

for destroying insects

lungs

quality of being developed

colorless, oily poison used as insecticide; stimulant drug; found in tobacco leaves

er arising from nonepithelial tissue such as connective tissue, lymphalic tissue,
bone

ich arouses or excites--spurs on

t stains the inside of a smoker's lungs and acts as a slow tissue poison; thick,
to black liquid with a pungent odor; obtained by the destructive distillation
t, shale; tars are produced of hydrocarbons and their derivatives; used in
urfaces and organic compounds

h as cigars, cigarettes, and snuff prepared from the leaves of the tobacco plant
s to the nightshade family

DRUGS

Concepts	Teacher Materials	Student
I. What is drug abuse? A. Terminology 1. Addiction 2. Habituation 3. Dependence a. Physical b. Psychological 4. Use 5. Misuse 6. Abuse	"What We Can Do About Drug Abuse" p. 3 Drug Abuse Education Drug Abuse: Escape to Nowhere pp. 27-43 The Scope of the Narcotic and Drug Abuse Problem Drugs For Young People, pp. 1-22 "The Control and Treatment of Narcotic Use" pp. 1-6 "The Crutch That Cripples: Drug Dependence" pp. 1-8 "What We Can Do About Drug Abuse" pp. 3-11 "Drug Addiction: A Review"	Ditto o "Facts Drugs" Ditto: "N Fa "Studer

Teacher Materials	Student Materials
"What We Can Do About Drug Abuse" p. 3	Ditto of Glossary
Drug Abuse Education	"Facts About Narcotics and Other Dangerous Drugs"
Drug Abuse: Escape to Nowhere pp. 27-43	Ditto: "Narcotics and Dangerous Drugs Fact Sheet"
The Scope of the Narcotic and Drug Abuse Problem	"Students and Drug Abuse"
Drugs For Young People, pp. 1-22	
"The Control and Treatment of Narcotic Use" pp. 1-6	
"The Crutch That Cripples: Drug Dependence" pp. 1-8	
"What We Can Do About Drug Abuse" pp. 3-11	
"Drug Addiction: A Review"	

Audio Visual	Motivating Questions
Transparencies: "What Is Drug Abuse?" D-9-37 "Upset - Chemical Comfort - Less Upset" D-9-14 "Chemically Comforted - Increasing Dosage - Addiction" D-9-15	Are you dependent on anything? How can we avoid misuse? Does the public understand how t use drugs safely and effectively What is the difference in meanin between habit forming and addiction? What is meant by emotional depen ence on drugs?

	Motivating Questions	Activities
	Are you dependent on anything?	Gather other terms they feel are important - list - define - possible reason for term usage.
	How can we avoid misuse?	
ess asing	Does the public understand how to use drugs safely and effectively?	Write poems and songs about drug abuse
	What is the difference in meaning between habit forming and addiction?	
	What is meant by emotional dependence on drugs?	

Concepts	Teacher Materials	St
B. What are the drugs of abuse (review)	"Fact Sheets" - Bureau of Narcotics and Dangerous Drugs, #6, 7, 8, 9, 10	"An "Dr
1. Stimulants		
a. Amphetamines	"Let's Talk About Goofballs And Pep Pills"	
1) Methedrine 2) Dexedrine	"Drugs of Abuse"	
3) Benzedrine	"Drugs and Your Body"	
b. Cocaine (will be studied under narcotics)	"Basic Facts About Abusable Drugs"	
c. Caffeine	"Fact Sheets" # 5, 4	
	"Let's Talk About Drugs"	
	"The Menace of Drug Abuse"	
	"The Drug Scene" pp. 46-61	

	Teacher Materials	Student Materials
f abuse	"Fact Sheets" - Bureau of Narcotics and Dangerous Drugs, #6, 7, 8, 9, 10	"Amphetamines" "Drug Abuse - The Empty Life"
s	"Let's Talk About Goofballs And Pep Pills"	
ine ne	"Drugs of Abuse"	
ine	"Drugs and Your Body"	
ll be studied tics)	"Basic Facts About Abusable Drugs"	
	"Fact Sheets" # 5, 4	
	"Let's Talk About Drugs"	
	"The Menace of Drug Abuse"	
	"The Drug Scene" pp. 46-61	

Audio Visual	Motivating Questions
Film:	Where does each drug come from?
"Drugs and the Nervous System" #1131	What are the social effects of each drug, mental, physical and legal?
Filmstrip:	
	What effects lead to abuse?
"Tell It Like It Is" (Set)	
"Let's Talk About Goofballs and Pep Pills" w/record and guide	What are the medical uses?
	Under what circumstances do doctor prescribe stimulants?
Transparencies:	
"Stimulants" (Description) D-9-43 "Amphetamines - Those Who Make Them" D-9-29	Why are amphetamines called pep pills?
"Amphetamines" (Description) D-9-30 "Caffeine" D-9-28	What leads individuals as students housewives, truck drivers, to abus amphetamines?
Poster:	
"Who Is The Drug Abuser?"	

	Motivating Questions	Activities
	Where does each drug come from?	List contents of home medicine cabinets and which may be harmful under unsupervised conditions.
tem"	What are the social effects of each drug, mental, physical and legal?	Make dittos of physical effects for class (group project)
	What effects lead to abuse?	Bulletin boards - have students gather material and make bulletin boards in group
s and Pep	What are the medical uses?	
	Under what circumstances do doctors prescribe stimulants?	Make posters
		Collect advertisements on patent medicines and analyze.
D-9-43 Make	Why are amphetamines called pep pills?	Have students compile a list of slang terms and meanings related to amphetamines.
n) D-9-30	What leads individuals as students, housewives, truck drivers, to abuse amphetamines?	

Concepts	Teacher Materials	Student
2. Depressants	The Drug Scene, pp. 46-61	"The Up
a. Barbiturates b. Tranquilizers c. Bromides d. Opium (to be studied under narcotics)	"Fact Sheets" Bureau of Narcotics and Dangerous Drugs, # 6, 7, 8, 9, 10	
	"Let's Talk About Goofballs and Pep Pills"	
	"The Glue Sniffing Problem"	
	"Barbiturates"	
3. Narcotics	"Fact Sheets" # 6, 7, 8, 9, 10	"Drugs
a. Cocaine b. Opium	"The Narcotic Addiction Problem"	"Hooked'
	"Narcotic Drug Addiction"	
1) Morphine 2) Codeine 3) Heroin	"Marijuana" pp. 79-91	
c. Synthetic	"Narcotics - Some Questions And Answers"	
1) Demeral 2) Methadone		

	Teacher Materials	Student Materials
	The Drug Scene, pp. 46-61	"The Up and Down Drugs"
	"Fact Sheets" Bureau of Narcotics and Dangerous Drugs, # 6, 7, 8, 9, 10	
d under	"Let's Talk About Goofballs and Pep Pills"	
	"The Glue Sniffing Problem"	
	"Barbiturates"	
	"Fact Sheets" # 6, 7, 8, 9, 10	"Drugs and the Automotive Age"
	"The Narcotic Addiction Problem"	"Hooked"
	"Narcotic Drug Addiction"	
	"Marijuana" pp. 79-91	
	"Narcotics - Some Questions And Answers"	

Audio Visual	Motivating Questions	Activiti
Filmstrip: "Let's Talk About Goofballs and Pep Pills" w/record and guide #70 Transparencies: "Barbiturates - Induce Sleep" D-9-48 "Sedatives" D-9-27 "Addiction to Barbiturates" D-9-20 "Tranquilizers Can Lead To Addiction" D-9-23 "Tranquilizers - Danger - Enter At Own Risk" D-9-21 "The First Tranquilizer" D-9-22 "Barbiturates - Ambulance" D-9-19 "Barbiturates - Careful Prescription" D-9-18 "Discovery of Barbital" D-9-17 "Sale & Regulation of Barbiturates" D-9-16 "Tranquilizers - Calm Nerves" D-9-49	Where does each drug come from? What are the effects of each drug - mental, physical, legal, social? What effects lead to abuse? What are the medical uses? Why do some people feel that they must take sleeping pills after drinking? What are the names of the barbiturates? What is sodium pentothal and how is it used?	Gather c died fro Make dit (group p Bulletin material Make pos Skit - '
Transparencies: "Opium and Derivatives" D-9-45 "Cocaine (history and description) D-9-31 "Cocaine - Stimulant" D-9-44 "Opium" (history and production) D-9-24 "Morphine - Civil War" D-9-25 "Heroin - Slang Terms" D-9-52 "Synthetics - Narcotics" D-9-46	Where does each drug come from? What are the effects of each drug - mental, physical, legal, social? What effects lead to abuse? What are the medical uses?	List op Make di class (Bulleti materia

	Motivating Questions	Activities
	Where does each drug come from?	Gather clippings about people who have died from drug abuse
and Pep 0	What are the effects of each drug - mental, physical, legal, social?	Make dittos of physical effects for class (group project)
	What effects lead to abuse?	
" D-9-48	What are the medical uses?	Bulletin boards - have students gather materials and make bulletin boards in groups
D-9-20 ddic-	Why do some people feel that they must take sleeping pills after drinking?	Make posters
ter		Skit - "Hooked"
-22	What are the names of the barbiturates?	
-9-19 crip-	What is sodium pentothal and how is it used?	
17		
"		
	Where does each drug come from?	List opium products
-45 ption)	What are the effects of each drug - mental, physical, legal, social?	Make dittos of physical effects for class (class project)
	What effects lead to abuse?	Bulletin boards - have students gather material and make bulletin boards in groups
ion)	What are the medical uses?	
25 52 -46		

Concepts	Teacher Materials	Student Ma
	"Drug Abuse - A Reference For Teachers" pp. 33-37	
	Film: "The People Next Door" #1336 (Teacher reference only)	
4. Hallucinogens a. LSD b. Marijuana c. Mescaline (peyote) d. Psilocybin e. DMT f. DET g. DOM - STP	"Fact Sheets" Bureau of Narcotics and Dangerous Drugs # 6, 7, 8, 9, 10	"Marijuana "LSD" (AMA
	The Problems of LSD and Emotional Disorder,	"Marijuana Detriment"
	"Why Not Marijuana?"	"Marijuana
	"LSD - Trip or Trap?"	
	"Psychedelics And The College Student"	
	"LSD - The False Illusion"	
	"The Dangers of Marijuana: Facts You Should Know"	
	"What About Marijuana"	
	Marijuana, pp. 1-14	
	The Drug Scene, pp. 142-164	
	"The Teenager and Drug Abuse"	

Teacher Materials	Student Materials
"Drug Abuse - A Reference For Teachers" pp. 33-37	
Film: "The People Next Door" #1336 (Teacher reference only)	
"Fact Sheets" Bureau of Narcotics and Dangerous Drugs # 6, 7, 8, 9, 10	"Marijuana" "LSD" (AMA)
The Problems of LSD and Emotional Disorder,	"Marijuana: Social Benefit or Social Detriment"
"Why Not Marijuana?"	"Marijuana or Alcohol - Which Harms Most?"
"LSD - Trip or Trap?"	
"Psychedelics And The College Student"	
"LSD - The False Illusion"	
"The Dangers of Marijuana: Facts You Should Know"	
"What About Marijuana"	
Marijuana, pp. 1-14	
The Drug Scene, pp. 142-164	
"The Teenager and Drug Abuse"	

Audio Visual	Motivating Questions
	Should all codeine containing drugs be sold only on prescription, why?
	Is there any excuse for prescription of addictive drugs over long periods of time?
	What are some of the uses of synthetic narcotics?
Films:	Where does each drug come from?
"LSD 25" #1349 "Marijuana" #1335	What are the effects of each drug - mental, physical, legal, social?
Film: (outside source)	
"Pot's A Put On"	What effects lead to abuse?
Filmstrips:	What are the medical uses?
"Marijuana - What Can You Believe?" w/record & guide Part I #83 Part II #84 "LSD - Trip or Trap?" #71 w/record & guide "Why Not Marijuana?" #73 w/record & guide	
Transparencies:	
"What Is The Fight Against Drug Traffic?" D-9-61 LSD - Slang Terms" D-9-51 "LSD" Description D-9-34 "Hallucinogens" D-9-47 "Marijuana" Slang terms D-9-53 "Marijuana - Used Throughout The World" D-9-32 "Marijuana" Description D-9-33	

	Motivating Questions	Activities
	Should all codeine containing drugs be sold only on prescription, why?	Make posters
		Skit - "Hooked"
	Is there any excuse for prescription of addictive drugs over long periods of time?	Develop a list of slang terms and meanings related to narcotics
	What are some of the uses of synthetic narcotics?	
	Where does each drug come from?	"Quiz Program"
	What are the effects of each drug - mental, physical, legal, social?	Fast learners - Gladstein Laboratory - Slow learners
	What effects lead to abuse?	Make dittos of physical effects for class (group project)
	What are the medical uses?	
You Believe?" I #83		Bingo-type game
#71		Debate - "Effects of Tobacco vs Marijuana"
#73 w/record		Bulletin boards - have students gather material and make bulletin boards in groups
		Make posters
ainst Drug		Skit - "Hooked"
9-51 -34 7 ms D-9-53 oughout The		
on D-9-33		

Concepts	Teacher Materials	Stude
II.	Drug Abuse: Escape to Nowhere pp. 15-20	"Mari Detri
A. What is the history of drug abuse?	The Scope of the Narcotic and Drug Abuse Problem, p.6	
	LSD Story, pp. 28-66	
	"Facts About Narcotics and Other Dangerous Drugs" pp. 5-10	
	"Drug Abuse - A Call For Action" pp. 9-12	
	Marijuana, pp. 16-35	
	"The Control and Treatment of Narcotic Use" pp. 7-9	
	"Narcotic Drug Addiction" pp. 1-2	
	The Drug Scene, pp. 122-141	
	"Drug Abuse: A Reference For Teachers" pp. 2-9	
B. What is the current situation concerning drugs?	"What Can We Do About Drug Abuse" p. 2	
1. Characteristics of the alienated student (The Drug Scene: Help or Hang Up? pp. 28-30)	LSD Story, pp. 66-128	
	Marijuana, pp.107-128	
	The Drug Scene, pp. 28-34; 1-14	

	Teacher Materials	Student Materials
drug	Drug Abuse: Escape to Nowhere pp. 15-20	"Marijuana - Social Benefit or Social Detriment?"
	The Scope of the Narcotic and Drug Abuse Problem, p.6	
	LSD Story, pp. 28-66	
	"Facts About Narcotics and Other Dangerous Drugs" pp. 5-10	
	"Drug Abuse - A Call For Action" pp. 9-12	
	Marijuana, pp. 16-35	
	"The Control and Treatment of Narcotic Use" pp. 7-9	
	"Narcotic Drug Addiction" pp. 1-2	
	The Drug Scene, pp. 122-141	
	"Drug Abuse: A Reference For Teachers" pp. 2-9	
uation	"What Can We Do About Drug Abuse" p. 2	
the (The	LSD Story, pp. 66-128	
Hang Up?	Marijuana, pp.107-128	
	The Drug Scene, pp. 28-34; 1-14	

Audio Visual	Motivating Questions
Transparencies: "What Is The History Of Drug Abuse?" D-9-55 "Map - History Of Drug Traffic" D-9-56 "Invention of the Hypodermic Needle" D-9-54 "Man's Escape From Reality - Romans" D-9-12 "Experimentation With Drugs" D-9-13	What was the effect of use of morphine during the Civil War? Is there a relationship between war and the use of narcotics? Why did the doctors during the Civil War use so much morphine? Why was the Chinese government opposed to the importation of opium when it was so popular with the people?
Filmstrips: "The Alienated Generation" Part I, II and III w/record #106	Do any governments today either encourage or ignore commerce in narcotics? Why is so much marijuana grown in Mexico? What is happening in Britain in regard to drugs? What are the hazards of drug abuse?

	Motivating Questions	Activities
Abuse?"	What was the effect of use of morphine during the Civil War?	Slow Learners Make bulletin boards
ic"	Is there a relationship between war and the use of narcotics?	Fast Learners
Needle"	Why did the doctors during the Civil War use so much morphine?	Efforts of the Chinese government to eliminate opium traffic - report
	Why was the Chinese government opposed to the importation of opium when it was so popular with the people?	Make maps of route of drugs: 1. Stone Age 2. Mesopotamia 3. Asia Minor 4. England and China 5. United States (Ideas from pp. 6-8 "Facts About Narcotics and Other Dangerous Drugs")
	Do any governments today either encourage or ignore commerce in narcotics?	Report: "Influence of Advertising on the Sale of Sedatives"
#106	Why is so much marijuana grown in Mexico?	Report: "What is the Local Drug Scene?"
	What is happening in Britain in regard to drugs?	
	What are the hazards of drug abuse?	

DRUGS (continued)

Concepts	Teacher Materials
	Drug Abuse: A Reference For Teachers, p. 30
III. Who are drug abusers and why?	"Drug Addiction: A Review" p. 78
A. Four groups	"Narcotic Drug Addiction" pp. 4-7
1. Specific or situational 2. Spree 3. Hard core	"Fact Sheet #4" Bureau of Narcotics and Dangerous Drugs
4. Hippies	"What We Can Do About Drug Abuse" pp. 11-15
	"Are You Concerned About Reports Of Drug Abuse Among Our Young People?"
	"Psychedelics and the College Student
	"Drug Use on High School and College Campuses" p. 641
	The Drug Scene: Help or Hang Up? pp. 15-45

	Teacher Materials	Student Materials
	Drug Abuse: A Reference For Teachers, p. 30	
s and why?	"Drug Addiction: A Review" p. 78	Ditto:
	"Narcotic Drug Addiction" pp. 4-7	"Four Groups of Abusers"
situational	"Fact Sheet #4" Bureau of Narcotics and Dangerous Drugs	"Drug Abuse: The Empty Life"
	"What We Can Do About Drug Abuse" pp. 11-15	
	"Are You Concerned About Reports Of Drug Abuse Among Our Young People?"	
	"Psychedelics and the College Student"	
	"Drug Use on High School and College Campuses" p. 641	
	The Drug Scene: Help or Hang Up? pp. 15-45	

Audio Visual	Motivating Questions	Acti
Poster:	What sort of people are most likely to succumb to the narcotics habit?	Fact post
"Overshadowing Doom"	Does everyone who abuses drugs become dependent or an addict?	Play
Film:		
"Speedscene - The Problem of Amphetamine Abuse" #1340 "Hippie Temptation" (outside source)	What kind of person is a potential addict?	Pape
	Can you change the world by carrying a sign?	
Transparency:		
"Situational User" D-9-38	Can you change the world by not taking a bath?	
Film:	Can you change the world by dropping out?	
"Escape to Nowhere" #1350		
Transparency:	Can you change the world by taking drugs?	
"Spree User" D-9-39		
Film:		
"Narcotics - Why Not?" #1338		
Transparencies:		
"Hard Core Addict" D-9-40 "What Is The Fight Against Drug Traffic?" D-9-61		

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Motivating Questions	Activities
What sort of people are most likely to succumb to the narcotics habit?	Factors contributing to drug abuse - posters, murals, group projects
Does everyone who abuses drugs become dependent or an addict?	Play: "Going to Pot or Not"
What kind of person is a potential addict?	Paper: "How to Deal with the Drug Pusher"
Can you change the world by carrying a sign?	
Can you change the world by not taking a bath?	
Can you change the world by dropping out?	
Can you change the world by taking drugs?	

DRUGS (continued)

Concepts	Teacher Materials
B. Why are some people drug abusers? 1. Adolescents feel awkward 2. "In" groups 3. Personality disorders 4. Potential drug dependent a. Unstable, immature b. Many leaders are insecure 5. "In" thing 6. Escape difficult conditions 7. Seek thrills 8. Avoid loneliness and frustration	Marijuana, pp. 37-61 "LSD and Marijuana" "The Teenager and Drug Abuse" "Drug Abuse: A Call For Action" pp. 14-29 "Narcotic Drug Addiction" pp. 4 Rehabilitating the Narcotic Addict, pp. 53-72 The Drug Scene: Help or Hang Up pp. 15-45 Drugs For Young People, pp. 60- "Our New Drug Addicts" "Drug Use on High School and Co Campuses" p. 643 (Reprint) "The Control and Treatment of Narcotic Use" pp. 11-20 "The Crutch That Cripples: Drug Dependence" p. 10 The Drug Scene: Help or Hang Up pp. 28-45 "Narcotic Drug Addiction" pp.

	Teacher Materials	Student Materials
rug	Marijuana, pp. 37-61	"Drugs and People - About Unhealthy Dependence"
	"LSD and Marijuana"	
awkward		"Drug Abuse: The Chemical Cop-Out"
	"The Teenager and Drug Abuse"	
rders		"Students and Drug Abuse"
ependent	"Drug Abuse: A Call For Action" pp. 14-29	"The Stoned Age"
ature are	"Narcotic Drug Addiction" pp. 4-7	
	Rehabilitating the Narcotic Addict, pp. 53-72	
condi-	The Drug Scene: Help or Hang Up? pp. 15-45	
and	Drugs For Young People, pp. 60-75	
	"Our New Drug Addicts"	
	"Drug Use on High School and College Campuses" p. 643 (Reprint)	
	"The Control and Treatment of Narcotic Use" pp. 11-20	
	"The Crutch That Cripples: Drug Dependence" p. 10	
	The Drug Scene: Help or Hang Up? pp. 28-45	
	"Narcotic Drug Addiction" pp. 4-7	

Audio Visual

Transparencies:

D-9-1 thru D-9-15
"Why People Take Drugs" D-9-35
and D-9-36

Filmstrips:

"Who's Got The Needle?" w/record
Part I #97, Part II #98, Part III #99
Part IV #100

Transparency:

"Why Drugs Are Abused" w/record
D-9-41

Filmstrips:

"LSD: The Acid World" w/record
Part I #81, Part II #82

Tape:

"Youth Speaks Out"

Poster:

"Speed Kills"

Motivating Questions

Why are drugs abused?

What factors have contributed to the drug abuse problem in the US?

Why are sleeping pills used so extensively in the US?

How can we account for the fact that drug addiction is on the increase in the suburbs as well as in the city?

Why is it so important to locate the source of drugs to protect youngsters from the pusher?

Why do people take drugs?

What personality defects or problems seem to lead drug users to stronger drugs?

Do people who take drugs enjoy taking them?

How would you justify a drug user's position if he is more interested in present gratification rather than long term gain?

	Motivating Questions	Activities
	Why are drugs abused?	Paper:
D-9-35	What factors have contributed to the drug abuse problem in the US?	"Social Conditions That Stimulate Drug Use"
	Why are sleeping pills used so extensively in the US?	Fast Learners
		Reports on effects of:
w/record , Part III #99	How can we account for the fact that drug addiction is on the increase in the suburbs as well as in the city?	Sociological Slum bleakness Poverty Minority frustrations
w/record	Why is it so important to locate the source of drugs to protect youngsters from the pusher?	Write poems and songs about why people abuse drugs
	Why do people take drugs?	Research how these do or do not occur
/record 2	What personality defects or problems seem to lead drug users to stronger drugs?	What is the appeal of drugs to some people?
	Do people who take drugs enjoy taking them?	Change things Heighten pleasure Creativity Esthetic response Self knowledge
	How would you justify a drug us[illegible]'s position if he is more intereste[illegible] in present gratification rather than long term gain?	

DRUGS (continued)

Concepts	Teacher Materials
IV. Is drug abuse costly?	Marijuana, pp. 63-76
A. Added responsibility B. Social aspects	"Fact Sheets" Bureau of Narc and Dangerous Drugs, #5
1. Individual 2. Family 3. Community	"Psychedelics and the Colleg Student" Princeton U. Press
	"The Drug Scene: p.15
a. Local b. State c. National	"Marijuana and Crime" James
C. Crime related costs	Narcotic E. Foundation Bulle Narcotics, Vol. 18 #2, April
	"Marijuana" pp. 91-103
	"The Drug Scene" p. 6
V. What is the fight against drug traffic?	"The Control and Treatment o Use" pp. 21-26
A. History	Drug Abuse: Escape to Nowher pp. 20-25
1. Opium wars 2. History of Bureau of Narcotics	The Scope of the Narcotic a Abuse Problem, H. K. Simon C
3. Harrison Act 4. Marijuana use	Marijuana, pp. 16-35

	Teacher Materials	Student Materials
tly?	Marijuana, pp. 63-76	"Drug Abuse: The Empty Life"
ibility s	"Fact Sheets" Bureau of Narcotics and Dangerous Drugs, #5	"Have You Ever Been Convicted Of A Felony?"
l	"Psychedelics and the College Student" Princeton U. Press	"LSD: A Trip Without A Return Ticket"
		"The Psychedelic Trap"
	"The Drug Scene: p.15	
	"Marijuana and Crime" James Munch	
nal		
costs	Narcotic E. Foundation Bulletin on Narcotics, Vol. 18 #2, April-June 66	
	"Marijuana" pp. 91-103	
	"The Drug Scene" p. 6	
against drug	"The Control and Treatment of Narcotic Use" pp. 21-26	
	Drug Abuse: Escape to Nowhere, pp. 20-25	
rs of Bureau of s	The Scope of the Narcotic and Drug Abuse Problem, H. K. Simon Co., p.6	
Act a use	Marijuana, pp. 16-35	

Audio Visual	Motivating Questions	Activ
	What are the legal aspects?	Fast
	Explain why narcotics addicts often become criminals.	Crime Great
	Who must pay the cost in dollars?	
	What are the social aspects?	
	What are the costs to a family, beyond dollars?	
	What are the costs to a community, beyond dollars?	
	Does drug abuse cause crime?	
	Explain why narcotics addicts often become criminals.	
Speaker from Bureau of Narcotics or State Drug Program	How is respect for the laws a society has established for itself, in a large sense necessary for the preservation of that society?	Begi poss Deve pape
	Can law enforcement do the whole job?	
	Can we wipe out this "side effect" (drug abuse) of our great medical progress?	Chec and from
	Is rebellion against authority a valid reason for drug abuse?	

	Motivating Questions	Activities
	What are the legal aspects?	Fast Learners
	Explain why narcotics addicts often become criminals.	Crimes Caused by Drug Abuse in Great Falls - report
	Who must pay the cost in dollars?	
	What are the social aspects?	
	What are the costs to a family, beyond dollars?	
	What are the costs to a community, beyond dollars?	
	Does drug abuse cause crime?	
	Explain why narcotics addicts often become criminals.	
ics	How is respect for the laws a society has established for itself, in a large sense necessary for the preservation of that society?	Begin preparation for mock trial, possible P.T.A. presentation Develop stories and programs for newspapers, radio and TV
	Can law enforcement do the whole job?	Check local stations, (TV and radio) and see if they have material on drugs from "Don't Guess About Drugs" pamphlet
	Can we wipe out this "side effect" (drug abuse) of our great medical progress?	
	Is rebellion against authority a valid reason for drug abuse?	

DRUGS (continued)

Concepts	Teacher Materials
B. International	*Look* 4/7/70
1. Route of hard narcotics	*Look* 3/5/68 "Facts About Narcotics and Ot Dangerous Drugs" pp. 50-53 "What We Can Do About Drug Ab P.A. #390, pp. 16-21 *The Drug Scene: Help or Hang* pp. 62-76 *Drug Abuse: A Source Book an Guide For Teachers*, pp. 57-66 F.D.A. Fact Sheet #2
C. Duties and limitations of enforcement	"Drug Use on High School and Campuses" p. 641 "What We Can Do About Drug Ab Public Affairs Pamphlet #390 pp. 15-16 "The Menace of Drug Abuse" Go National Research Bureau, p. Marijuana, pp. 129-150

	Teacher Materials	Student Materials
narcotics	Look 4/7/70 Look 3/5/68 "Facts About Narcotics and Other Dangerous Drugs" pp. 50-53 "What We Can Do About Drug Abuse" P.A. #390, pp. 16-21 The Drug Scene: Help or Hang Up? pp. 62-76 Drug Abuse: A Source Book and Guide For Teachers, pp. 57-66 F.D.A. Fact Sheet #2	#35 "Britain's Rx For Our Drug Addicts"
tions of	"Drug Use on High School and College Campuses" p. 641 "What We Can Do About Drug Abuse" Public Affairs Pamphlet #390 pp. 15-16 "The Menace of Drug Abuse" Goddard National Research Bureau, p. 10 Marijuana, pp. 129-150	

Audio Visual	Motivating Questions
Speaker from Smith, Kline and French	
Transparency:	
"What is the Fight Against Drug Traffic?" D-9-61	
	How effective is law enforcement in curbing drug abuse?
	How, in spite of all government efforts to the contrary, can so much heroin get into the US?
	How do nations today cooperate in attempting to control international traffic in narcotics?

Motivating Questions	Activities
How effective is law enforcement in curbing drug abuse?	Have students trace the route of marijuana in history
How, in spite of all government efforts to the contrary, can so much heroin get into the US?	Have students research history of drugs in China
How do nations today cooperate in attempting to control international traffic in narcotics?	Research contributions of countries with a history of drug abuse

DRUGS (continued)

Concepts	Teacher Materials
D. Private companies and individuals	"Fighting Illegal Drug Traffic" Smith, Kline & French, pp. 2-68
VI. Proposed legislation	
A. Montana 69 and 71 revisions	
B. Other states	
C. Federal	"Fact Sheet #2" Bureau of Narcot and Dangerous Drugs FDA Fact Sheet #1 Rehabilitating the Narcotics Add pp. 31-48

	Teacher Materials	Student Materials
	"Fighting Illegal Drug Traffic" Smith, Kline & French, pp. 2-68	"Drug Abuse: The Chemical Cop-Out"
ions	"Fact Sheet #2" Bureau of Narcotics and Dangerous Drugs FDA Fact Sheet #1 __Rehabilitating the Narcotics Addict__ pp. 31-48	

Audio Visual	Motivating Questions
Transparency: "What is the Fight Against Drug Traffic?" D-9-61	Why is marijuana legally classified as a narcotic?
	How is drug distribution controlled by law? Why?
	What are the sources of illicit drugs
	What should "I" do if my family or friends are abusing drugs?
Possibly legislator, judge or attorney will speak	What should Montana do in regard to drug law revisions
	What are your neighboring states doing about the drug situation?
	What states have a low drug problem per capita?

	Motivating Questions	Activities
Against 61	Why is marijuana legally classified as a narcotic?	Report on Opium Convention at the Hague, 1912
	How is drug distribution controlled by law? Why?	Research the function of INTERPOL
	What are the sources of illicit drugs?	
	What should "I" do if my family or friends are abusing drugs?	
ge or	What should Montana do in regard to drug law revisions	Have students interview and tape session with legislator
	What are your neighboring states doing about the drug situation?	
	What states have a low drug problem per capita?	
		Slow learners gather information and report

DRUGS (continued)

Concepts	Teacher Materials
D. Other countries	Drugs For Young People, pp.
1. England	Drug Abuse: A Source Book a Guide for Teachers pp. 65-67 "Britain's Rx for Our Drug A Post, Aug 18, 1966 Drug Abuse: Escape to Nowhe pp. 51-52 "Drug Abuse: A Call for Act American Social Health Assn. pp. 13-14 The Drug Scene: Help or Han pp. 62-95
E. Legalization of Marijuana	The Drug Scene: Help or Hang pp. 99-121 "Marijuana and Society, JAMA 6/24/68 "Facts About Marijuana" pp. Science News - A Special Rep "Problems of Pot Research" 1 Marijuana p. 204

	Teacher Materials	Student Materials
ntries	Drugs For Young People, pp. 23-41	
nd	Drug Abuse: A Source Book and Guide for Teachers pp. 65-67	
	"Britain's Rx for Our Drug Addicts" Post, Aug 18, 1966	
	Drug Abuse: Escape to Nowhere, pp. 51-52	
	"Drug Abuse: A Call for Action" American Social Health Assn., pp. 13-14	
	The Drug Scene: Help or Hang Up? pp. 62-95	
ion of Marijuana	The Drug Scene: Help or Hang Up? pp. 99-121	
	"Marijuana and Society, JAMA 6/24/68	
	"Facts About Marijuana" pp. 8-9	
	Science News - A Special Report - "Problems of Pot Research" 1/24/70	
	Marijuana p. 204	

Audio Visual	Motivating Questions
	If you (class) had the power make and enforce our laws, wh changes would be made in the advertising, transporting, an sale of narcotics in patent medicines?
	Should laws against the use o drugs such as marijuana be re evaluated?

Motivating Questions	Activities
If you (class) had the power to make and enforce our laws, what changes would be made in the advertising, transporting, and sale of narcotics in patent medicines?	Group projects and reports
Should laws against the use of drugs such as marijuana be re-evaluated?	Debate

DRUGS (continued)

	Concepts	Teacher Materials
VII.	Research	Science News, Jan 24, 1970 "Problems of Pot Research"
	A. THC B. Marijuana C. LSD	"The Great Marijuana Plot" Jess Stern, p. 27
		The Drug Scene: Help or Hang p. 194
		Resource Book for Drug Abus Education p. 27
		"The Use of Drugs by Jazz Musicians"
		"Drug Use on High School an College Campuses" p. 645
		Resource Book for Drug Abus Education pp. 31-33

Teacher Materials	Student Materials
Science News, Jan 24, 1970 "Problems of Pot Research"	#36 Problems of Pot Research
"The Great Marijuana Plot" Jess Stern, p. 27	"The Psychedelic Trap"
The Drug Scene: Help or Hang Up? p. 194	
Resource Book for Drug Abuse Education p. 27	
"The Use of Drugs by Jazz Musicians"	
"Drug Use on High School and College Campuses" p. 645	
Resource Book for Drug Abuse Education pp. 31-33	

Audio Visual

Films:

"Speedscene: The Problem of Amphetamines" #1345
"Use of Rats and Amphetamines" (outside source)

Posters:

"Bad Trip"
"Get the Point - Avoid the Needle"

Motivating Questions

What does current research s about antidotes for LSD, her amphetamines, barbiturates a others?

What have recent studies sho regarding increasing wisdom, and art ability, insight and standing from the use of LSD marijuana?

Why is there so little real scientific knowledge about t permanent effects of such dr as marijuana and the halluci

What kind of genetic damage scientists believe hallucino may cause?

Should those who do not seem suffer external effects of m juana be permitted to smoke

	Motivating Questions	Activities
of ines" e Needle"	What does current research say about antidotes for LSD, heroin, amphetamines, barbiturates and others? What have recent studies shown regarding increasing wisdom, music and art ability, insight and understanding from the use of LSD and marijuana? Why is there so little real scientific knowledge about the permanent effects of such drugs as marijuana and the hallucinogens? What kind of genetic damage do scientists believe hallucinogens may cause? Should those who do not seem to suffer external effects of marijuana be permitted to smoke it?	Run experiments on mice or other animals using legal drugs available a. Check reactions to different amounts - overdose b. Suggested drugs 1. Coffee - Tea 2. Aspirin 3. Inhalants 4. Other items found in home medicine cabinets

DRUGS (continued)

	Concepts	Teacher Materials
VIII.	How successful is rehabilitation?	"Realities We Must Face - Won't" Life, March 5, 196
	A. Drug Abuse Centers	"Fact Sheet #12" Bureau c and Dangerous Drugs
	1. Federal 2. Private	
	B. Withdrawal C. Use of synthetic drugs D. Voluntary vs compulsory	Drugs for Young People, R Ed. Press, pp. 88-103
		Drug Abuse: Escape to Now pp. 45-53
		"The Control and Treatmen Narcotic Use" HEW, pp. 26
		Rehabilitating the Narcot Addict, pp. 75-357, 9-29
		"What We Can Do About Dru Pamphlet #390, pp. 21-27
		The Drug Scene: Help or H pp. 177-189, 203
		"Britain's Rx For Our Dru Saturday Evening Post 9/1
		The Scope of the Narcotic Abuse Problem
		"The Life Cycle of the Na Addict and of Addiction" Charles Winnek, UN Bullet Narcotics, Vol. 16 #1 Jan

	Teacher Materials	Student Materials
itation?	"Realities We Must Face - But Won't" Life, March 5, 1965	"Community Based Treatment Programs for Narcotic Addiction" US Printing Office
	"Fact Sheet #12" Bureau of Narcotics and Dangerous Drugs	"Drugs: Kicking the Habit" Time 1/17/69
s	*Drugs for Young People*, Religious Ed. Press, pp. 88-103	"What Goes On Inside Synanon" True May 1967
ry	*Drug Abuse: Escape to Nowhere*, pp. 45-53	"The Crutch That Cripples: Drug Dependence: AMA 1968, pp. 11-14
	"The Control and Treatment of Narcotic Use" HEW, pp. 26-41	"Drug Abuse: The Chemical Cop-Out" MPC
	Rehabilitating the Narcotic Addict, pp. 75-357, 9-29	*Look*, 11/30/65
	"What We Can Do About Drug Abuse" Pamphlet #390, pp. 21-27	
	The Drug Scene: Help or Hang Up? pp. 177-189, 203	
	"Britain's Rx For Our Drug Addicts" Saturday Evening Post 9/18/66	
	The Scope of the Narcotic and Drug Abuse Problem	
	"The Life Cycle of the Narcotic Addict and of Addiction" Charles Winnek, UN Bulletin Narcotics, Vol. 16 #1 Jan-Mar 64	

Audio Visual	Motivating Questions
Films: (outside source) "The House On The Beach" Part I (NET Film Service) "The Seekers" (Benchmark Films) "Fight or Flight" (J & F Productions)	How can addicts be helped and where can the help be received Where can the drug dependent individual be treated? Can drug dependence be cured? Why do some people with personality maladjustment become addicted to drugs, while other even some who experiment with drugs - do not? Why do some addicted persons se out and accept help when other do not? Why do most people approve cent for the cure of drug addiction but do not want them in their own communities? Why is drug addiction so hard to cure? What personality factors or soc pressures make people who have apparently been cured of the ha go back to it? What makes the addicts fear th "cold turkey" treatment?

	Motivating Questions	Activities
	How can addicts be helped and where can the help be received?	
Beach" Part I) chmark Films) (J & F Productions)	Where can the drug dependent individual be treated?	
	Can drug dependence be cured?	
	Why do some people with personality maladjustment become addicted to drugs, while others - even some who experiment with drugs - do not?	
	Why do some addicted persons seek out and accept help when others do not?	
	Why do most people approve centers for the cure of drug addiction, but do not want them in their own communities?	
	Why is drug addiction so hard to cure?	
	What personality factors or social pressures make people who have apparently been cured of the habit go back to it?	
	What makes the addicts fear the "cold turkey" treatment?	

DRUGS (continued)

Concepts	Teacher Materials
	"Narcotic Drug Addiction" Pub Health Service #1021, pp. 8-2
	"New Hope For Drug Addicts" L (Nov 30, 1965)
	"Encounter: How Kids Turn Off Look 4/15/69
IX. What does the future hold?	UN Bulletin - "Life Cycle of Addict"
A. Maturing out	Science News - Special Report "The Problems of Pot Research
B. The future of cannabis	Marijuana pp. 15-153
	The Drug Scene: Help or Hang pp. 190-206

	Teacher Materials	Student Materials
	"Narcotic Drug Addiction" Public Health Service #1021, pp. 8-20	
	"New Hope For Drug Addicts" Look (Nov 30, 1965)	
	"Encounter: How Kids Turn Off Drugs" Look 4/15/69	
old?	UN Bulletin - "Life Cycle of Addict"	"The Crutch That Cripples: Drug Dependence" AMA p.16
	Science News - Special Report - "The Problems of Pot Research"	
abis	Marijuana pp. 15-153	
	The Drug Scene: Help or Hang Up? pp. 190-206	

Audio Visual	Motivating Questions
Poster: "Drugs Made a Monkey Out Of Me"	Is there a solution t abuse problem? What can "I" do about What can you do to he generation gap? Are there any problem marijuana research? Does the addict want the habit? What is "maturing out What could happen to if the number of drug to grow? What does the future agers if they become drugs? Why is it extremely i drug addicts be detec be placed promptly un

	Motivating Questions	Activities
	Is there a solution to the drug abuse problem?	
nkey Out Of Me"	What can "I" do about the drug abuse problem?	
	What can you do to help prevent the generation gap?	
	Are there any problems in the current marijuana research?	
	Does the addict want to escape from the habit?	
	What is "maturing out?"	
	What could happen to our country if the number of drug users continues to grow?	
	What does the future hold for teenagers if they become addicted to drugs?	
	Why is it extremely important that drug addicts be detected early and be placed promptly under treatment?	

Concepts | Teacher Materials

Teacher Materials	Student Materials

Audio Visual	Motivating Questions	Activi
	What, then, should enter into your decision as to whether or not you will use marijuana?	
	Can the drug habit be kept from spreading?	
	If cigarettes are harmful, why do we permit their sale, but forbid the sale of marijuana?	

X. TEACHER INFORMATION

Summary of Drug Laws

This is a general summary of drug laws, for a complete listing of Montana La
unit.

The following outline is based on the publication, "The Drug Information Ser

Federal and state drug laws regulate the manufacture, sale and distribution
and maximum penalties for breaking the law. The state laws are modelled on the f
penalties.

Misdemeanor and Felony

Under both federal and state law there are two kinds of crimes: misdemeanors
sentence of one year and felonies which carry sentences of over a year. Convicti
judge can, at his discretion, suspend sentence, impose a fine only, or put the pe
Conviction for a felony means that the judge must impose the minimum jail sentenc
varies according to whether the conviction was for a first, second, or third offe
illegal sale or possession of a drug, whether the sale was to a minor and, in the
the drug involved.

In general, under both federal and state law, penalties are more severe for
away or promising to give away--than for possession for personal use. Federal la
illegal importers and distributors, does not at present make a distinction betwee
it regulate the severity of penalties according to the amount of a drug found to
state laws do make this distinction, reasoning that possession of large amounts o
to sell.

Under federal law, illegal possession of depressants, stimulants and halluci
Illegal sale or manufacture of these drugs is a felony.

Marijuana is treated under federal law and defined by most states laws as a
a narcotic by both federal and state law. Possession and sale of narcotics are f
law, and carry severe penalties. Under federal law and many state laws, the deat
of narcotics or marijuana by a person over 21 to a person under 18.

X. TEACHER INFORMATION

Summary of Drug Laws

of drug laws, for a complete listing of Montana Law, see the eighth grade drug

ased on the publication, "The Drug Information Series: Guidance Associates."

ws regulate the manufacture, sale and distribution of drugs and establish the minimum
king the law. The state laws are modelled on the federal law, but often provide harsher

ate law there are two kinds of crimes: misdemeanors, which carry a fine or a maximum
ies which carry sentences of over a year. Conviction for a misdemeanor means that the
suspend sentence, impose a fine only, or put the person convicted on probation.
that the judge must impose the minimum jail sentence specified under the law. This
e conviction was for a first, second, or third offense, whether the offense was for
a drug, whether the sale was to a minor and, in the case of state law, the amount of

deral and state law, penalties are more severe for sale--which is defined as giving
--than for possession for personal use. Federal law, which is aimed primarily at
tors, does not at present make a distinction between sale and possession, nor does
nalties according to the amount of a drug found to be in illegal possession. Many
ction, reasoning that possession of large amounts of a drug is evidence of intention

l possession of depressants, stimulants and hallucinogenic drugs is a misdemeanor.
these drugs is a felony.

r federal law and defined by most states laws as a narcotic. Cocaine is defined as
state law. Possession and sale of narcotics are felonies under federal and state
s. Under federal law and many state laws, the death penalty can be imposed for sale
person over 21 to a person under 18.

Because the use of marijuana is widespread among young people, and be the narcotic regulations, it is important to remember that young people ar and state law.

Under federal law, a person who committed a crime before his 18th bir Delinquent and the court is not forced to impose a minimum penalty. The m age of 21. This gives the court flexibility as to suspension of sentence of conviction.

Under the Federal Youth Corrections Act, a person sentenced before hi the court, be considered a Youth Offender. This means that the court does and has greater flexibility in sentencing--with the exception of felonies, imposed.

Although the legal age limits for juvenile delinquents and juvenile c so designated are tried in separate juvenile courts with the courts having and destroy records of conviction. The police, however, retain a record c

The federal drug laws are currently being reviewed and reevaluated by much controversy over and public criticism of the harshness of the law in fields of drug abuse and law enforcement have expressed dissatisfaction wi regard to illegal manufacture, sale, distribution and possession of large the psychedelic drugs.

Historically, the drug laws were established and made increasingly se alarm over sudden increases in drug abuse. The rationale behind the law h deter illegal manufacture, sale and consumption of dangerous drugs.

At the time of the first attempt to control drug traffic--The Harris in every thousand Americans was addicted to narcotics. (The current esti The Harrison Act was a response to widespread addiction to opium and morp patent medicines that could be bought easily and cheaply in any drug stor soldiers during the Civil War as it was an effective pain-killer and was

The Harrison Act imposed strict penalties for illegal importing, sel required that narcotic drugs be dispensed only on the prescription of a p to limit and control imports of coca leaves, opium and marijuana and to r opiates, barbiturates and amphetamines as these drugs were developed.

TEACHER INFORMATION (continued)

arijuana is widespread among young people, and because marijuana is treated severely under
it is important to remember that young people are treated more leniently under federal

person who committed a crime before his 18th birthday is considered to be a Juvenile
is not forced to impose a minimum penalty. The maximum penalty is imprisonment until the
court flexibility as to suspension of sentence or parole, and there is no official record

uth Corrections Act, a person sentenced before his 22nd birthday can, at the discretion of
a Youth Offender. This means that the court does not keep an official record of conviction
ty in sentencing--with the exception of felonies, in which case the minimum sentence must be

ge limits for juvenile delinquents and juvenile offenders vary from state to state, youngsters
n separate juvenile courts with the courts having discretion to suspend sentence, give parole,
nviction. The police, however, retain a record of the arrest.

s are currently being reviewed and reevaluated by Congress. In particular, there has been
public criticism of the harshness of the law in regard to marijuana. Professionals in the
law enforcement have expressed dissatisfaction with the relative leniency of the law in
ture, sale, distribution and possession of large amounts of barbiturates, amphetamines and

ug laws were established and made increasingly severe in order to meet periodic public
es in drug abuse. The rationale behind the law has always been that stiff penalties would
, sale and consumption of dangerous drugs.

irst attempt to control drug traffic--The Harrison Act of 1914--it was estimated that one
ns was addicted to narcotics. (The current estimate is one in every three thousand.)
sponse to widespread addiction to opium and morphine. Opium was a common ingredient in
ld be bought easily and cheaply in any drug store. Morphine was given freely to wounded
War as it was an effective pain-killer and was thought to be non-addictive.

osed strict penalties for illegal importing, selling and possession of narcotics, and
ugs be dispensed only on the prescription of a physician. Subsequent laws were enacted
rts of coca leaves, opium and marijuana and to require prescriptions for the synthetic
amphetamines as these drugs were developed.

With the exception of heroin, which cannot be prescribed, and cocaine, which is a
through special licensing procedures, narcotic drugs can be obtained only with a docto
Records must be kept by the pharmacist and the physician.

The Narcotic Drug Control Act of 1956 imposed mandatory minimum penalties for all
For possession, penalties range from two to ten years for a first offense, 5-20 years
years for subsequent offenses. For sale or importation, the mandatory minimum sentenc
offense and 10 years for a second or subsequent offense with suspension of sentence, p
for all but the first offense for possession.

The Federal Drug Abuse Control Amendments of 1965 require detailed records on man
distribution of depressant and stimulant drugs and limit prescriptions to five refills
This law also limits the availability of hallucinogenic drugs to qualified investigato
Administration.

The 1965 Amendments also established penalties for illegal manufacture, distribut
intent to sell, of stimulants, depressants and hallucinogens. The penalties were incre
to $10,000 and/or a jail sentence of up to 5 years. Persons over 21 convicted of sell
under 18 can be fined up to $20,000 and/or be sentenced to jail for up to 15 years.

The 1968 Amendments for the first time imposed a penalty of a fine of $1,000 and/
in jail for illegal possession for personal use. The 1968 law also gives the Commissi
Administration broad powers to apply the law to any stimulant, depressant, hallucinoge
potentially dangerous drugs not presently controlled.

Although there is general agreement that the law justly controls the manufacture
drugs, the humanity of sentencing drug users to prison where they receive little or no
has long been questioned. In the 1950's public opinion began to shift toward a medica
drug abuse.

New York State ruled in 1962 that addicts convicted of minor crimes may be placed
than prison. The Federal Narcotic Addict Rehabilitation Act of 1966 provides that add
or convicted have commitment to a treatment center as an alternative to standing trial
Under recent legislation, states and individual communities can get federal funds from
Mental Health, to build, staff and operate new treatment facilities for addicts.

TEACHER INFORMATION (continued)

which cannot be prescribed, and cocaine, which is available to physicians only
s, narcotic drugs can be obtained only with a doctor's written prescription.
ist and the physician.

of 1956 imposed mandatory minimum penalties for all narcotic and marijuana offenses.
m two to ten years for a first offense, 5-20 years for a second offense and 10-20
sale or importation, the mandatory minimum sentence is five years for a first
r subsequent offense with suspension of sentence, parole and probation prohibited
ossession.

Amendments of 1965 require detailed records on manufacture, shipment and
ulant drugs and limit prescriptions to five refills over a period of six months.
ty of hallucinogenic drugs to qualified investigators approved by the Food Drug

lished penalties for illegal manufacture, distribution, sale or possession with
essants and hallucinogens. The penalties were increased in 1968 to a fine of up
f up to 5 years. Persons over 21 convicted of selling these drugs to persons
and/or be sentenced to jail for up to 15 years.

rst time imposed a penalty of a fine of $1,000 and/or a sentence of one year
personal use. The 1968 law also gives the Commissioner of the Food and Drug
y the law to any stimulant, depressant, hallucinogenic, habit-forming or
esently controlled.

eement that the law justly controls the manufacture and distribution of dangerous
drug users to prison where they receive little or no help for their drug problem
1950's public opinion began to shift toward a medical approach to the problem of

that addicts convicted of minor crimes may be placed in a hospital rather
Addict Rehabilitation Act of 1966 provides that addicts who have been charged
treatment center as an alternative to standing trial or going to prison.
nd individual communities can get federal funds from the National Institute of
operate new treatment facilities for addicts.

I. What is drug abuse?

A. Terminology

1. Addiction: a term favored by law enforcement officers rather than me
brought about by repeated or continuous use of a drug tha
of severe acute physical symptoms when the drug is remove
2. Habituation: is a habit characterized by a desire for the drug, some
for the abuser of the drug.
3. Physical dependence: is gradually replacing the term addiction. It
produced by the repeated administration of a drug, which
tion of the drug to prevent withdrawal symptoms.
4. Psychological dependence: is gradually replacing the term habituatio
persons who repeatedly self-administer drugs and who even
carry on normal everyday activities unless they take the
5. Misuse of drugs: the use of a drug for a purpose for which it was no
another person's prescription drugs - "Here, try these."
use at a later time, when it was not meant to be used.
6. Abuse of drugs: wrongful, improper use, tends to bring disgrace, wi
tending to deceive, fraudulent and excess use of, describ
drugs as basically an unnecessary and wanton act.
7. Use of drugs: legal, proper medical consumption of drugs for the pur
as insulin for diabetics, aspirin for arthritis.

B.1 Stimulants: Excite the central nervous system, increased activity and
extended periods of time, combat fatigue, curbs appetite,

1. Types

a. Amphetamines

1) Methedrine
2) Dexedrine
3) Benzedrine

b. Cocaine (see narcotics)
c. Caffeine

TEACHER INFORMATION (continued)

ed by law enforcement officers rather than medical personnel. A state of the body
t by repeated or continuous use of a drug that is characterized by the development
ute physical symptoms when the drug is removed.
characterized by a desire for the drug, some psychic dependence and potential harm
er of the drug.
gradually replacing the term addiction. It is an altered physiological state
the repeated administration of a drug, which necessitates the continued administra-
drug to prevent withdrawal symptoms.
e: is gradually replacing the term habituation; a pattern of drug use developed by
repeatedly self-administer drugs and who eventually come to feel that they cannot
mal everyday activities unless they take the drug.
e of a drug for a purpose for which it was not intended. Examples: the use of
on's prescription drugs - "Here, try these." Saving part of a prescription to
er time, when it was not meant to be used.
ul, improper use, tends to bring disgrace, without proper cause, perverted, misapplied,
eceive, fraudulent and excess use of, describe abuse. Therefore, we see abuse of
ically an unnecessary and wanton act.
oper medical consumption of drugs for the purpose the drugs were designed. Such
or diabetics, aspirin for arthritis.

entral nervous system, increased activity and ability to go without sleep for
iods of time, combat fatigue, curbs appetite, mood-elevating.

ics)

2. Legal uses:are manufactured by major drug companies and used m
depression, alcoholism and other conditions.
3. Misuse: in illegal, non-medical use they produce a high, eu
raise energy levels; they are used by students to r
and truck drivers who are behind the wheel for long
4. Abuse: Because the body develops a tolerance to amphetamin
which wildly exaggerates the normal effects of thes
ativeness, tremor of the hands, enlarged pupils and
drug psychosis resembling schizophrenia develops wi
auditory and visual. Criminals frequently use amph
alertness during exploits. While amphetamines do n
develop a tolerance to the physical effects of the
dependence. Continued abuse of amphetamines can be
ances, as toxic psychosis or paranoid reactions.
5. Effects on society: It is estimated by the National Safety Co
accidents involving teenagers can be traced to drug
when a truck, driven for 49 hours by a benzedrine-b
similar accident on the New Jersey Turnpike in 1963
killed six people.
Many authorities consider amphetamines as the most
today. But many other authorities claim that the e
ous as they account for more fatalities. All autho
increasing at an alarming rate creating an abundant

B.2 Depressants: Slow down body functions

1. Types

a. Barbiturates: induce sleep,compounded from barbituric acid

1) amobarbital (amobarbital sodium)
2) pentobarbital (sodium pentobarbital)
3) secobarbital (secobarbital sodium)

b. Tranquilizers: calming effect
c. Bromides: sedative
d. Opium (see narcotics)

TEACHER INFORMATION (continued)

ufactured by major drug companies and used medically for treating obesity, mental
sion, alcoholism and other conditions.
egal, non-medical use they produce a high, euphoric feeling. Athletes use them to
energy levels; they are used by students to remain awake and active for long periods
uck drivers who are behind the wheel for long hours, which often leads to tragic results.
e the body develops a tolerance to amphetamines, abusers increase their dosage gradually,
wildly exaggerates the normal effects of these drugs and results in excitability, talk-
ess, tremor of the hands, enlarged pupils and heavy perspiration. In serious cases, a
sychosis resembling schizophrenia develops with delusions and hallucinations, both
ry and visual. Criminals frequently use amphetamines to increase their courage and
ess during exploits. While amphetamines do not cause physical addiction, abusers
p a tolerance to the physical effects of the drugs as well as a psychic or emotional
ence. Continued abuse of amphetamines can be responsible for severe emotional disturb-
as toxic psychosis or paranoid reactions.
y: It is estimated by the National Safety Council that 50% of the fatal, one-car
nts involving teenagers can be traced to drugs. In New York, nine persons were killed
truck, driven for 49 hours by a benzedrine-blurred driver, went out of control. A
r accident on the New Jersey Turnpike in 1963, involved 12 trucks and three cars and
six people.
uthorities consider amphetamines as the most dangerous drug in use by young people
But many other authorities claim that the effects of depressants can be more danger-
they account for more fatalities. All authorities agree the abuse of stimulants is
sing at an alarming rate creating an abundant supply of persons capable of other drug abuse.

own body functions

induce sleep, compounded from barbituric acid, trade names usually end in "al"

al (amobarbital sodium)
ital (sodium pentobarbital)
ital (secobarbital sodium)

: calming effect
iative
rcotics)

TEACHER INFORMATION (continued)

2. Legal uses: to treat nervous tensions, high blood pressure, insomnia, as a pain re
operative anesthetic, hyperthyroidism; both physical and mental illness
3. Misuse: they are used to relieve tensions. Over indulgence is found in quiet n
members of families seek an artificial shield from reality.
4. Abuse: Among drug abusers, they are used to produce intoxication and hallucina
chemically induced feeling of euphoria and well being.
Continued and excessive dosages of barbiturates result in slurring of s
of balance and falling, quick temper, and a quarrelsome disposition. Ov
when taken in conjunction with alcohol, result in unconsciousness and d
Physical dependence does occur with the excessive doses used by drug ab
developed. Withdrawal symptoms are usually exceedingly dangerous and c
5. Effect on society: In legal use these drugs are the most common of the prescripti
Approximately $60,000,000 worth (according to statistics in 1968) are d
This quantity is sufficient for about 60 doses for every man, woman and
States.
Approximately 6,000 deaths occur each year from these drugs, some accid
suicides.
There are a large number of over dosage deaths from depressants because
characteristics. With continued use, the amount necessary to relax the
The toxic limit which the body can withstand remains constant and as th
and larger doses to obtain the desired effect, he comes closer to the t
he is treading a narrow pathway between the amount necessary to produce
capable of producing coma and death. One slight miscalculation and....

B.3 Narcotics: Generally refers to opium and drugs made from opium. These drugs are d
of the base of the poppy flower and refined into some of the most valua
man, but also some of the most thoughtlessly abused drugs in the world.
drugs have been included under the Federal law as narcotics, which are
entirely different from the opium derivatives. An example of this is c
derivative of the coca leaf and a stimulant to the central nervous syst
number of especially defined synthetic drugs, called "opiates" are clas
drugs under federal law.

1. Types

   a. Cocaine
   b. Opium - morphine, codeine, heroin
   c. Synthetic - Demeral, methadone

TEACHER INFORMATION (continued)

rvous tensions, high blood pressure, insomnia, as a pain reliever, pre and post
esthetic, hyperthyroidism; both physical and mental illnesses.
d to relieve tensions. Over indulgence is found in quiet neighborhoods where
amilies seek an artificial shield from reality.
busers, they are used to produce intoxication and hallucinations, and produce a
nduced feeling of euphoria and well being.
d excessive dosages of barbiturates result in slurring of speech, staggering, loss
nd falling, quick temper, and a quarrelsome disposition. Overdoses, particularly
n conjunction with alcohol, result in unconsciousness and death.
endence does occur with the excessive doses used by drug abusers. Tolerance is
Withdrawal symptoms are usually exceedingly dangerous and can cause death.
legal use these drugs are the most common of the prescription medications.
y $60,000,000 worth (according to statistics in 1968) are distributed each year.
y is sufficient for about 60 doses for every man, woman and child in the United

y 6,000 deaths occur each year from these drugs, some accidental, some deliberate

large number of over dosage deaths from depressants because of their tolerance
ics. With continued use, the amount necessary to relax the patient increases.
mit which the body can withstand remains constant and as the person takes larger
oses to obtain the desired effect, he comes closer to the toxic level. Finally,
ng a narrow pathway between the amount necessary to produce sleep and the quantity
roducing coma and death. One slight miscalculation and........

fers to opium and drugs made from opium. These drugs are distilled from the juice
of the poppy flower and refined into some of the most valuable medicines known to
o some of the most thoughtlessly abused drugs in the world. In addition, other
een included under the Federal law as narcotics, which are pharmacologically
ferent from the opium derivatives. An example of this is cocaine, which is a
f the coca leaf and a stimulant to the central nervous system. Additionally, a
pecially defined synthetic drugs, called "opiates" are classified as narcotic
federal law.

odeine, heroin
, methadone

2. Legal uses: They are among the most valuable drugs available to physi
term acute pain resulting from surgery, fractures, burns,
in the later stages of terminal illness, such as cancer.
pain killer by which other narcotic drugs are evaluated.
These drugs depress the central nervous system to produce
to pain, create drowsiness, induce sleep, and reduce physi
Manufacture and distribution of medicinal opiates are stri
Government and through laws designed to keep these product
medical use. Those who distribute these drugs are registe
must comply with specific record keeping and drug security

3. Misuse: The misuse of narcotics is not so significant nor does it
This may relate from its high and quick dependence, and/or
use or the known fear of using the drug except under docto

4. Abuse: The abuse of narcotics dates from ancient times, man has u
history, and it still is a serious problem.
The appeal of morphine-like drugs lies in their ability to
psychological and physical stimuli and to produce a sense
and anxiety.
Chronic use leads to both physical and psychological depen
when drug supplies are cut off, withdrawal symptoms may de
may include nervousness, anxiety, sleeplessness, yawning,
enlargement of pupils, "gooseflesh," muscle twitching, sev
hot and cold flashes, vomiting, diarrhea, increase in brea
temperature, and a feeling of desperation and an obsession
However, the intensity of withdrawal symptoms varies with
and the amount of drug customarily used.
Addicts live under constant threat of overdose, a miscalcu
to respiratory depression, can result. Most narcotic abus
form through an intravenous injection.
The price tag on the abuse of these drugs is high. For ex
continue drug abuse despite the fact that her baby will li
die shortly after birth unless medical treatment is unde

TEACHER INFORMATION (continued)

hey are among the most valuable drugs available to physicians and are widely used for short-erm acute pain resulting from surgery, fractures, burns, etc., as well as to reduce suffering the later stages of terminal illness, such as cancer. Morphine is used as the standard ain killer by which other narcotic drugs are evaluated.

hese drugs depress the central nervous system to produce a marked reduction in sensitivity pain, create drowsiness, induce sleep, and reduce physical activity.

anufacture and distribution of medicinal opiates are stringently controlled by the Federal overnment and through laws designed to keep these products available only for legitimate edical use. Those who distribute these drugs are registered with federal authorities and ust comply with specific record keeping and drug security requirements.

he misuse of narcotics is not so significant nor does it compare with the abuse of narcotics. his may relate from its high and quick dependence, and/or the medical control of personal se or the known fear of using the drug except under doctor's care.

he abuse of narcotics dates from ancient times, man has used opium through all recorded istory, and it still is a serious problem.

he appeal of morphine-like drugs lies in their ability to reduce sensitivity to both sychological and physical stimuli and to produce a sense of euphoria. They dull fear, tension nd anxiety.

hronic use leads to both physical and psychological dependence. Tolerance develops and hen drug supplies are cut off, withdrawal symptoms may develop. Characteristically, they ay include nervousness, anxiety, sleeplessness, yawning, running eyes and nose, sweating, nlargement of pupils, "gooseflesh," muscle twitching, severe aches in back and leg muscles, ot and cold flashes, vomiting, diarrhea, increase in breathing rate, blood pressure, and emperature, and a feeling of desperation and an obsessional desire to secure a "fix." owever, the intensity of withdrawal symptoms varies with the degree of physical dependence nd the amount of drug customarily used.

ddicts live under constant threat of overdose, a miscalculation in their dose and death, due o respiratory depression, can result. Most narcotic abusers take their narcotics in liquid orm through an intravenous injection.

he price tag on the abuse of these drugs is high. For example, a pregnant addict will usually ontinue drug abuse despite the fact that her baby will likewise be addicted - and probably ie shortly after birth unless medical treatment is undertaken at once.

5. Effects on society: Some narcotics drugs - see legal use - are of th
when they are misused and abused and physical and psycholo
as society also suffer. The addicted person does not con
psychological treatment, which he has no means to provide
Some estimates of narcotic addicts in the United States r
reported that the life of the heroin addict, which includ
addicts, is shortened by at least 20-25 years. Since the
addictive, the person taking them soon develops a preoccu
neglect their other responsibilities and duties; malnutri
hepatitis and bacterial endocarditis and other infections
It is not uncommon for a heroin addict to require four to
cost $100 per day. That is $3,000 per month. With a nee
employee of any sort and must rely on his money from ille
society must eventually provide.
England has tried, with much success, to make drugs avail
clinic program. They had assumed they would reduce crime
by eliminating the need for an illegal source of drugs an
need of addicts to seek large sums of money for illicit d
bring the addict back to a state of normal health.
Making drugs available in this way has not been effective
England. But they have had an increase in the number of
the program may soon be discontinued.

B.4 Hallucinogens: Produce disorientation and illusions of the various sense
hallucinations and dreams.

1. Types

   a. LSD 25: (d-Lysergic acid diethylamide) Most of these drugs in i
are manufactured in clandestine laboratories. Legitimate
produce some hallucinogenic drugs, but only for investiga
diverted to the illicit market.
Lysergic acid is a natural product of an ergot fungus whi
produced by chemical synthesis of the diethylamide and ly
LSD from scratch is complicated.

TEACHER INFORMATION (continued)

iety: Some narcotics drugs - see legal use - are of the most valuable use to society but n they are misused and abused and physical and psychological dependence results, then we society also suffer. The addicted person does not contribute by his need of medical and chological treatment, which he has no means to provide for.
e estimates of narcotic addicts in the United States run as high as 200,000. It has been orted that the life of the heroin addict, which includes the majority of all narcotic icts, is shortened by at least 20-25 years. Since the drugs of this family are so highly ictive, the person taking them soon develops a preoccupation with the drugs. They tend to lect their other responsibilities and duties; malnutrition becomes a problem, and serum atitis and bacterial endocarditis and other infections are common among intravenous takers. is not uncommon for a heroin addict to require four to six "fixes" per day, which could t $100 per day. That is $3,000 per month. With a need this high he will not be an loyee of any sort and must rely on his money from illegal sources, which other members of iety must eventually provide.
land has tried, with much success, to make drugs available to addicts on a controlled nic program. They had assumed they would reduce crime related to illegal drug traffic eliminating the need for an illegal source of drugs and eliminate crimes caused by a d of addicts to seek large sums of money for illicit drugs. They have not pretended to ng the addict back to a state of normal health.
ing drugs available in this way has not been effective in reducing the crime rate in land. But they have had an increase in the number of addicts. Evidence points that program may soon be discontinued.

duce disorientation and illusions of the various senses. The user may have vivid llucinations and dreams.

l-Lysergic acid diethylamide) Most of these drugs in illicit channels of distribution e manufactured in clandestine laboratories. Legitimate chemical manufacturers do oduce some hallucinogenic drugs, but only for investigational purposes, but some are verted to the illicit market.
sergic acid is a natural product of an ergot fungus which grows on rye. LSD 25 is oduced by chemical synthesis of the diethylamide and lysergic acid. The synthesis of D from scratch is complicated.

TEACHER INFORMATION (continued)

b. Marijuana: Marihuana. Flowering tops and leaves of the female cannabis s
in a bush-like clump from 3-20 feet in height. The stalks range i
in diameter. Each group or "hand" of leaves contains an odd numbe
5 to 7 arranged like a fan. Each leaflet is long and slender, co
ends. Each has a sawtoothed edge and is rough and sticky. Streng
from place to place.

c. Mescaline: (peyote) From buttons of the peyote cactus plant.

d. Psilocybin: From certain mushrooms grown in Mexico.

e. DMT: In seeds of certain plants in the West Indies and South America.

f. DET: Diethyltryptamine chemically related to DMT, but has not yet been

g. DOM or STP: 4-methyl-2, 5-dimethoxyamphetamine. Some claim it is stronge
amphetamines. Serenity,Tranquility, and Peace--STP. "Make your
a familiar oil product.

2. Use - Marijuana: Fibers have been used to manufacture twine, rope bags, clot
seeds are used for bird seed. There is some legal use in the Unit
purposes.
LSD: Has become the subject of considerable scientific study. Researc
conducted into possible chromosomal effects from the use of LSD.
The National Institute of Mental Health is continuing research on
of physicians from the Kentucky's Veterans Administration Hospita
been used successfully in the treatment of 122 chronic alcoholics
social adjustment. In Eastern Europe, psychiatrists have successf
gap between the patient and the therapist.
Peyote: Used by Indian tribes in religious ceremonies.
Psilocybin: Used by some Mexican Indians in religious rituals.

3. Misuse: Because of no medical use of the hallucinogens, these drugs are ab
4. Abuse:Marijuana - Although there are several ways of using marijuana, includi
sprinkling on sweets, etc., the most common method is by smoking.
are highly unpredictable and relate primarily to the central nerv
effect is stimulation - increased circulation and respiration. Th
and dilated and may be watery. The user may become exhilarated a

TEACHER INFORMATION (continued)

Flowering tops and leaves of the female cannabis sativa plant. It grows
clump from 3-20 feet in height. The stalks range from 1/2 inch to 4 inches
Each group or "hand" of leaves contains an odd number of leaflets, usually
d like a fan. Each leaflet is long and slender, coming to a point at both
s a sawtoothed edge and is rough and sticky. Strength of marijuana differs
place.

From buttons of the peyote cactus plant.

rtain mushrooms grown in Mexico.

rtain plants in the West Indies and South America.

ine chemically related to DMT, but has not yet been found in plantlife

2, 5-dimethoxyamphetamine. Some claim it is stronger than LSD. Related to
Serenity, Tranquility, and Peace--STP. "Make your motor run better,"
product.

have been used to manufacture twine, rope bags, clothing, and paper. Sterilized
for bird seed. There is some legal use in the United States for veterinary

subject of considerable scientific study. Research is currently being
possible chromosomal effects from the use of LSD.
nstitute of Mental Health is continuing research on a limited basis. A team
from the Kentucky's Veterans Administration Hospital reported that LSD has
essfully in the treatment of 122 chronic alcoholics in both physical and
ent. In Eastern Europe, psychiatrists have successfully used LSD to bridge the
e patient and the therapist.
ian tribes in religious ceremonies.
by some Mexican Indians in religious rituals.

medical use of the hallucinogens, these drugs are abused rather than misused.
h there are several ways of using marijuana, including mixing in foods,
sweets, etc., the most common method is by smoking. The effects of marijuana
redictable and relate primarily to the central nervous system. The initial
ulation - increased circulation and respiration. The eyes become red, puffy,
d may be watery. The user may become exhilarated and talkative. Perception

of time, space and motion may be severely distorted. As the he becomes highly suggestable and may engage in erratic beha Secondary effects include drowsiness, staggering, slurred sp may include hallucinations and fantasy.

LSD: Physical reactions may include dilated pupils, lowered tempe profuse perspiration, increased blood sugar, and rapid heart ingestion the user may experience visual changes followed by hallucinatory state, the user may suffer loss of depth and t distortions with respect to size of objects, movements, colo touch, and his own "body image." During this period the use through the senses, to make sensible judgements, and to see distorted, hence making him susceptible to personal injury. the event he decides to drive a car.

After the "trip" the user may suffer acute anxiety or depres time. Recurrences of hallucinations have been reported days Psychological dependence may develop and it is possible tha a tolerance to the drug.

Mescaline (peyote): Generally ground into a powder and taken ora milligrams produces illusions and hallucinations for 5 to 1

Psilocybin: 4 to 8 milligrams produce hallucinations for approxi to produce tolerance.

DMT: Taken orally, inhaled vapor of burning seeds or injected, 6 hallucinations for 45 to 60 minutes.

DET: Injecting a dose of 50 to 60 milligrams causes visual disto sense of time, for from 2 to 3 hours. It is usually taken tobacco, tea, parsley, or marijuana.

DOM or STP: Doses of more than 3 milligrams can cause pronounce from 8 to 10 hours. Has appeared in tablet form.

5. Social Effects: The person who is inclined to experiment with marijua immature, and therefore the most susceptible to the adverse changes observed include a loss of motivation and drive, im to problems and an escape from reality.

TEACHER INFORMATION (continued)

, space and motion may be severely distorted. As the user's inhibitions are released
nes highly suggestable and may engage in erratic behavior.
ry effects include drowsiness, staggering, slurred speech and a euphoric stupor which
lude hallucinations and fantasy.
l reactions may include dilated pupils, lowered temperature, nausea, "goosebumps,"
perspiration, increased blood sugar, and rapid heartbeat. During the first hour after
on the user may experience visual changes followed by extreme changes in mood. In the
natory state, the user may suffer loss of depth and time perception accompanied by
ions with respect to size of objects, movements, color, spatial arrangement, sound,
and his own "body image." During this period the user's ability to perceive objects
the senses, to make sensible judgements, and to see common dangers is lessened and
ed, hence making him susceptible to personal injury. He may also injure others in
nt he decides to drive a car.
he "trip" the user may suffer acute anxiety or depression for a variable period of
Recurrences of hallucinations have been reported days, or months after the last dose.
ogical dependence may develop and it is possible that the regular user may build up
ance to the drug.
eyote): Generally ground into a powder and taken orally. A dose of 350 to 500
ams produces illusions and hallucinations for 5 to 12 hours.
4 to 8 milligrams produce hallucinations for approximately six hours. Has been known
uce tolerance.
rally, inhaled vapor of burning seeds or injected, 60 to 150 milligrams produce
nations for 45 to 60 minutes.
ng a dose of 50 to 60 milligrams causes visual distortions, dizziness, and a vague
f time, for from 2 to 3 hours. It is usually taken by smoking it in a mixture of
, tea, parsley, or marijuana.
Doses of more than 3 milligrams can cause pronounced hallucinogenic effects lasting
to 10 hours. Has appeared in tablet form.

he person who is inclined to experiment with marijuana is frequently emotionally
e, and therefore the most susceptible to the adverse psychological effects. The
observed include a loss of motivation and drive, immature judgement and adjustment
lems and an escape from reality.

The teenager who experiments with the use of marijuana decision. Although he may not realize all of the cons doing something illegal and which may be physically an He accepts the risks willingly however; he is not tric decision in what may be a long series of decisions as drugs. Once he is started, however, he becomes drug o becomes less rational. His freedom of choice is surre masks his normal judgement, blots out his past experie only the thrill of further illicit experimentation. Extended use of LSD can result in severe mental disord 15 to 20 such cases every month.

II.A What is the history of drug abuse?

Since the world began, people have experienced unhappiness, disappointmen be joyful and free from frustrations and responsibilities. But some peop on and are unable to strive for wholesome solutions to their problems. forget. They think there must be an escape hatch or a detour around the rugged.

Sleep is nature's way of helping us by letting us escape for a time and b and mental activity. We usually awaken refreshed and better able to cope effects of sleep.

But sleep is not enough for some people, for it is not possible to sleep when we really need it most. From earliest times some people have sought have thought they found one in drugs that in part imitate nature's way of most common of the sleep-producing drugs is alcohol. Opium from the popp substance that makes people forget their troubles temporarily and gives r distress. People have also used stimulation drugs, such as cocaine, whic they can meet and overcome their difficulties.

Although people have taken drugs for thousands of years, it has always be have deliberately used these artificial means in meeting life's problems realize that some drugs actually increase their difficulties and lessen t Thus they accept false temporary relief instead of seeking more realistic

TEACHER INFORMATION (continued)

eenager who experiments with the use of marijuana has made a deliberate, intentional ion. Although he may not realize all of the consequences, he recognized that he is something illegal and which may be physically and psychologically damaging to him. cepts the risks willingly however; he is not tricked into it. He is making the first ion in what may be a long series of decisions as he continues on into the use of . Once he is started, however, he becomes drug oriented, so that each new decision es less rational. His freedom of choice is surrendered as his drug clouded mind his normal judgement, blots out his past experiences, and leads him to consider the thrill of further illicit experimentation.

ded use of LSD can result in severe mental disorder. UCLA Medical Center reports 20 such cases every month.

rug abuse?

eople have experienced unhappiness, disappointment, pain and fear. Life cannot always frustrations and responsibilities. But some people lack the courage to meet life head ive for wholesome solutions to their problems. Instead, they try to "run away" or to e must be an escape hatch or a detour around the obstruction that makes life rough and

helping us by letting us escape for a time and by giving us rest from physical exertion usually awaken refreshed and better able to cope with our problems after the healing

for some people, for it is not possible to sleep all the time and sometimes not even ost. From earliest times some people have sought other ways to escape reality. Some one in drugs that in part imitate nature's way of relieving troubles and fatigue. The -producing drugs is alcohol. Opium from the poppy plant is another sleep-producing ple forget their troubles temporarily and gives relief from physical pain and mental lso used stimulation drugs, such as cocaine, which give them a false confidence that me their difficulties.

ken drugs for thousands of years, it has always been the poorly adjusted individuals who these artificial means in meeting life's problems and fears. They do not seem to actually increase their difficulties and lessen their ability to solve their problems. temporary relief instead of seeking more realistic solutions to the challenges of life.

Opium, hashish (marijuana), and cocaine, three of the most dangerous drugs, can be
Stone Age.

Prehistoric people cultivated the opium poppy, for the findings of archaeologists
dwellers of the Stone Age grew the plant. Mesopotamia was probably the original h
to historians, so it's not surprising that the Egyptians and Persians were acquain
thousand years before Christ. In early centuries camels carried poppy products fr
of the world. By the beginning of the Christian era, opium and its uses were well
used the product in practicing medicine, as did the early Arabian physicians. The
and other ailments. In those days opium was taken by mouth and was used in linime
pain of bruises and strains.

During the ninth and tenth centuries products were prepared from the poppy in As
parts of the world by Arab camel trains. In this way opium was introduced into Pe
it was widely recommended for the relief of dysentery and for diseases of the eyes
in India that eventually the poppy plant was raised there, and several hundred yea
Company did a thriving business, bringing opium from India to China.

The Chinese government tried to control the opium trade. The East India Company
and this caused trouble between England and China which led to the Opium War of 1

The last Ming Emperor of China (1628-44) warned of the dangers of smoking and iss
however, he was unable to enforce this law. People were adding a little opium to
the foundation of the widespread habit of opium smoking in China.

Opium smoking was introduced on the Pacific Coast of the United States by Chinese
The habit was taken up by the "sporting crowd" in cities. The problems of addict
of opium use were compounded in the 1800's by the discovery of two opium alkaloid
codeine (1832). The properties of these drugs, like those of their parent, were

But perhaps the most important factor influencing the spread of narcotic addictio
of the hypodermic needle. Brought to this country in 1856, it was used widely du
morphine, not only to battle-wounded, but also to those suffering from dysentery.
returned to civilian life addicted to morphine. A term prevalent at the time, "S
meant narcotic addiction.

TEACHER INFORMATION (continued)

a), and cocaine, three of the most dangerous drugs, can be traced back perhaps to the

vated the opium poppy, for the findings of archaeologists show that the Swiss lake
e grew the plant. Mesopotamia was probably the original home of the poppy, according
ot surprising that the Egyptians and Persians were acquainted with opium at least a
rist. In early centuries camels carried poppy products from Asia Minor to other parts
ginning of the Christian era, opium and its uses were well known. The Greeks and Romans
ticing medicine, as did the early Arabian physicians. They prescribed it for headaches
those days opium was taken by mouth and was used in liniments and ointments for relieving
ins.

th centuries products were prepared from the poppy in Asia Minor and carried to other
ab camel trains. In this way opium was introduced into Persia, India, and China, where
d for the relief of dysentery and for diseases of the eyes. The drug was so widely used
the poppy plant was raised there, and several hundred years later the East India
usiness, bringing opium from India to China.

ried to control the opium trade. The East India Company set up a system of smuggling
between England and China which led to the Opium War of 1840.

China (1628-44) warned of the dangers of smoking and issued an edict forbidding it;
o enforce this law. People were adding a little opium to their tobacco, and this laid
idespread habit of opium smoking in China.

uced on the Pacific Coast of the United States by Chinese immigrants in the 1800's.
y the "sporting crowd" in cities. The problems of addiction arising from the spread
nded in the 1800's by the discovery of two opium alkaloids, morphine (1805) and
perties of these drugs, like those of their parent, were imperfectly understood.

ortant factor influencing the spread of narcotic addiction was the invention, in 1843,
. Brought to this country in 1856, it was used widely during the Civil War to administer
ttle-wounded, but also to those suffering from dysentery. Vast numbers of soldiers were
e addicted to morphine. A term prevalent at the time, "Soldier's Illness," actually
n.

Since opium and its derivatives had important medical uses - and since these d
inexpensively in any pharmacy - they were found virtually everywhere.

While addiction was mushrooming into a social problem during the 19th Century,
becoming increasingly - though imperfectly - aware of this phenomenon. Until
the medical profession generally put opium abuse in the same category as alcoh

Throughout the 18th Century and most of the 19th Century, the use of opiates -
generally offensive to public morals. Occasional use, was held in much the sa
is today. And opium users themselves suffered little public condemnation, dou
standing of so many of them. When people were known to be "enslaved by the ha
they were often more pitied than condemned. The drug itself was held to blame
however, were held in low esteem because of the connection of smoking with the
"opium dens."

By the 1890's public attitudes toward narcotic use and users began to change.
now fully recognized the destructive nature of narcotic dependence and gave wi
Public awareness also came from addicts who wrote accounts of their experienc
published sensational stories of addiction among young people. Added to these
that great numbers of people had become addicted. In 1914, more than 200,000
narcotic drugs - one for each 400 in the population.

During the war between the Japanese and the Chinese in the 1930's, opium was u
Japanese government. They paid the Chinese war lords to have the farmers in t
Japanese then distributed it to other parts of China and Manchuria. This sche
because opium lessened the resistance of the Chinese people.

About 2737 B.C., a Chinese emporor noted a number of accurate observations co
centuries hemp remained the principal source of clothing for the Chinese.

The Chinese developed an interesting folk custom. They took the hard hemp st
shape of a snake's head. When a Chinese became ill his friends or relatives w
totem, believing it had the power to dispel evil spirits. While the Chinese a
the hemp plant, they had little, if any, use for the peculiar resinous exudate
clusters on the female plant. Comtemporary Chinese moralists, watching the e
resin in those wild youth of the era, concluded that this frenetic euphoria ha
Shortly, with proper warning to recalcitrant youths, the drug was labeled the
the hemp plant or its resin as an escapist phenomenon forbidden to the Chinese

TEACHER INFORMATION (continued)

atives had important medical uses - and since these drugs could be bought legally and macy - they were found virtually everywhere.

ooming into a social problem during the 19th Century, the medical profession was hough imperfectly - aware of this phenomenon. Until the latter part of the century, nerally put opium abuse in the same category as alcohol abuse.

ry and most of the 19th Century, the use of opiates - at least orally - was not blic morals. Occasional use, was held in much the same light as an occasional drink s themselves suffered little public condemnation, doubtless because of the social em. When people were known to be "enslaved by the habit" (the common term of the day), ed than condemned. The drug itself was held to blame, not the user. Opium smokers esteem because of the connection of smoking with the underworld and with Oriental

itudes toward narcotic use and users began to change. One reason was that many physicians destructive nature of narcotic dependence and gave widespread publicity to their findings. me from addicts who wrote accounts of their experiences, and from newspapers which pries of addiction among young people. Added to these factors was the growing realization ople had become addicted. In 1914, more than 200,000 in this country were addicted to each 400 in the population.

he Japanese and the Chinese in the 1930's, opium was used as a "weapon" by the old ey paid the Chinese war lords to have the farmers in their domains raise opium. The d it to other parts of China and Manchuria. This scheme helped the Japanese aggressors he resistance of the Chinese people.

se emporor noted a number of accurate observations concerning the hemp plant. For the principal source of clothing for the Chinese.

interesting folk custom. They took the hard hemp stalk and carved one end into the When a Chinese became ill his friends or relatives would beat his bed with this "magic" the power to dispel evil spirits. While the Chinese attributed supernatural powers to little, if any, use for the peculiar resinous exudate that oozed from the flower lant. Comtemporary Chinese moralists, watching the effects produced by the use of this h of the era, concluded that this frenetic euphoria had no place in stable Chinese culture. ning to recalcitrant youths, the drug was labeled the "Liberator of Sin" and the use of sin as an escapist phenomenon forbidden to the Chinese.

One medicinal use of hemp resin was recorded about 220 A.D. in the biogr
mixed the resin with wine, termed it Mo-Yo, and employed it as an anesth
surgical procedures. According to this ancient doctor one good dose and
table. It was so effective that later when he questioned his patients t
during their surgery.

South and west of the Chinese lived a people who could more than appreci
land was India; its religion, Hinduism. Cannabis was not indigenous to
there from somewhere in central Asia. In the beginning hemp use was con
members of the Indian society, who desired its effects to lessen the tem
world. This group used the drug to place worshippers in an attitude of
reality.

The use of the drug was not without complications. Soon cannabis became
effects that legislators became fearful of the ultimate result. Despite
careful study that revealed the use of the drug was so widespread attemp
futile, begrudgingly issued a recommendation to the League of Nations in
practical nor advisable to attempt to exterminate the practice. Some th
come to grips with this problem again. This time it legislated against
Indian government appears to have accepted the argument that cannabis us
and to have embraced the opposition, maintained by diverse investigators
drugs tends to eliminate the learned patterns of culture.

In Assyria, scholars were aware of a fascinating plant they referred to
could not only be used in spinning and in rope-making but also to dispel
had reached the Middle and Near East.

By 500 A.D., cannabis was being used throughout most of Europe except fo
employed the drug for numerous ailments.

By the middle of the 13th Century A.D., adverse conditions arose for Ara
Garden of Cafour, near Cairo, notorious for the abuse of hashish by its
tion was viewed by contemporary writers as a "just punishment of God."

About the 13th Century, the central Africans discovered the intoxicating
hemp vapors. Their technique was simple: they threw the weed on the fi
smoke. Finally, pottery-makers in North Africa stumbled upon the idea c
smoke and remove some of its irritants. The hashish pipe thus came into
means of cannabis consumption for the "kif" smokers of North Africa.

TEACHER INFORMATION (continued)

hemp resin was recorded about 220 A.D. in the biography of the Chinese physician Hoa-Tho. He wine, termed it Mo-Yo, and employed it as an anesthetic for controlling pain during various According to this ancient doctor one good dose and the patient was ready for the operating fective that later when he questioned his patients they all claimed they were free of pain .

e Chinese lived a people who could more than appreciate the effects of hemp intoxication. The religion, Hinduism. Cannabis was not indigenous to this area. More than likely it was taken in central Asia. In the beginning hemp use was concentrated among the more contemplative n society, who desired its effects to lessen the temptations and the noise of the external sed the drug to place worshippers in an attitude of reverence by separating them from gross

was not without complications. Soon cannabis became so important to those dependent on its tors became fearful of the ultimate result. Despite these fears the government, after a evealed the use of the drug was so widespread attempts at its elimination seemed almost issued a recommendation to the League of Nations in 1930 to the effect that it was neither ble to attempt to exterminate the practice. Some thirty years later the government had to his problem again. This time it legislated against the use of cannabis. In so doing, the pears to have accepted the argument that cannabis use has deleterious social consequences the opposition, maintained by diverse investigators that continued use of hallucinogenic nate the learned patterns of culture.

s were aware of a fascinating plant they referred to in 650 B.C. as Azallu. This plant ed in spinning and in rope-making but also to dispel depression of the spirit. Cannabis le and Near East.

s was being used throughout most of Europe except for the far west. Arabic physicians r numerous ailments.

13th Century A.D., adverse conditions arose for Arabian hashish users. In 1251, the ar Cairo, notorious for the abuse of hashish by its fakirs, was destroyed. This destruc- contemporary writers as a "just punishment of God."

ry, the central Africans discovered the intoxicating experience afforded by breathing technique was simple: they threw the weed on the fire, then stood around inhaling the tery-makers in North Africa stumbled upon the idea of making a water pipe to cool the e of its irritants. The hashish pipe thus came into being. This is still the most common nsumption for the "kif" smokers of North Africa.

In 1844, in Paris, the specialty of a famous club was a sweetmeat which contained introduced to the romantic society of the day from Algeria.

Cannabis was known and used in the New World as a euphoria-producing agent when C prove the world was round. During the early sixteenth century, and possibly befo certain Aztec religious ceremonies. Montezuma II was known to partake of a stran to fall into a deep sleep.

In 1611, near Jamestown, Virginia, cannabis was first purposely planted and grown the United States. Instructions were given the Colonists by His Majesty King Jam tion. By 1630 hemp became a staple of the colonial clothing industry. Soon half clothing and most of their summer clothing, were woven from its fibers.

Cannabis failed to enjoy any significant popularity as a euphoriant in the United began to bring their little bags of "mota" across the border in the early part of

In the Thirties, the demand for cannabis became so intense that Mexican laborers requirements. Marijuana importation became a full time occupation with some, and original ten dollars a kilo (2.2 pounds) to nearly fifty dollars.

LSD was first synthesized in Switzerland in 1938 by Dr. Albert Hoffman, a chemist on the mind were not discovered until 1943 and experimentation was limited to a s researchers. In 1954 it was introduced into the United States and received its f of a controlled laboratory environment.

Because of abuse and the unpredictable effects of the drug, all production was st Laboratories distributed 22 grams to the National Mental Health Institute. This the United States and is being used in licensed experimentation. LSD is relative and large quantities are being manufactured in small bootleg laboratories.

II.B What is the current situation concerning drugs?

Man's pharmacological cornucopia has provided us with a fantastic array of drugs, to either indiscriminate of illicit use. Indiscriminate use of drugs is practice and the general public. For example, a physician who, without adequate study, in the patient, out of ignorance, or because of pressures by the patient or the pat a drug that should or could be withheld. But over-prescribing by physicians is m

TEACHER INFORMATION (continued)

ialty of a famous club was a sweetmeat which contained hashish. This dish was society of the day from Algeria.

in the New World as a euphoria-producing agent when Columbus was attempting to During the early sixteenth century, and possibly before, it was utilized in emonies. Montezuma II was known to partake of a strange tobacco that caused him

rginia, cannabis was first purposely planted and grown in what is now known as tions were given the Colonists by His Majesty King James I, to increase hemp produc- a staple of the colonial clothing industry. Soon half the Colonists' winter summer clothing, were woven from its fibers.

y significant popularity as a euphoriant in the United States until Mexican laborers bags of "mota" across the border in the early part of this century.

for cannabis became so intense that Mexican laborers could not meet the market portation became a full time occupation with some, and the price jumped from an (2.2 pounds) to nearly fifty dollars.

n Switzerland in 1938 by Dr. Albert Hoffman, a chemist. It's hallucinatory effects ered until 1943 and experimentation was limited to a small group of European s introduced into the United States and received its first unsupervised use outside environment.

predictable effects of the drug, all production was stopped in 1966 and Sandoz 2 grams to the National Mental Health Institute. This is the only legal supply in eing used in licensed experimentation. LSD is relatively simple to produce, however, eing manufactured in small bootleg laboratories.

ion concerning drugs?

ucopia has provided us with a fantastic array of drugs, all of which are subject f illicit use. Indiscriminate use of drugs is practiced widely by both physicians or example, a physician who, without adequate study, inadequate information about nce, or because of pressures by the patient or the patient's relatives administers d be withheld. But over-prescribing by physicians is minuscule in comparison to

the enormous amount of indiscriminate self-medication practiced by the American publi
households, a total of 2,539 medications were found. This was an average of 30 medic
Of these 1 in 5 was a prescription drug and 4 in 5 a drug purchased over the counter.
public as the major cause of indiscriminate drug use.

Narcotic abuse increasingly involves younger persons residing in ghetto areas of our
Half the known addicts are under age thirty and growing numbers under age twenty. In
severity of the heroin problem, greater efforts at rehabilitation, and stringent laws
have failed to bring any reduction in the incidence of narcotic addiction in the Unit
fifteen years.

Marijuana is the drug which has caught the fancy of the young and the rebellious in A
prevalence of use has not been well established. Clearly the precise amount of use w
depending on the location of the community and the availability of the drug. Accordi
colleges there is a higher incident of use on the West Coast, as compared with the Ea
use is by no means confined to colleges, high schools and ghetto areas. It has invad
urban and suburban communities, as well as the Armed Forces. In Vietnam, an estimate
the drug. In analyzing the use you must also consider the frequency of the use. In
found that between 50% and 70% of the users used it on no more than five occasions.

The growth of LSD, according to Donald B. Louria, M.D., has reached a plateau and wil
feelings are that its supporters have attempted to create a bandwagon philosophy, try
recruits that everyone is using it, that it must, therefore be relatively safe and th
should quickly join the growing coterie. He also writes of a growing use of the stim
ucinogens as mescaline.

Part of the stimulant boom can be explained by the enormous profits which can be real
factor and the resulting effects are also a contributing factor to their growing abus

The Alienated Individual in the Current Scene:

For the alienated, American society is ugly, without taste, filthy and reprehensibly
are considered dishonest, hypocritical, constricting and dehumanizing. The alienated
spontaneity and genuineness, and trumpet their complete repudiation of anything which
phoniness, self-deception or premeditation. Life is unhappy, lonely, meaningless and
disdain their families, the teaching establishment and virtually every facet of our s
alienated college student: One, he has a tendency to live in the present and to avoid

TEACHER INFORMATION (continued)

criminate self-medication practiced by the American public. In one study of 86) medications were found. This was an average of 30 medications per household. iption drug and 4 in 5 a drug purchased over the counter. pointing to the general indiscriminate drug use.

involves younger persons residing in ghetto areas of our large urban centers. nder age thirty and growing numbers under age twenty. Increased awareness of the lem, greater efforts at rehabilitation, and stringent laws passed in the 1950's luction in the incidence of narcotic addiction in the United States, over the last

has caught the fancy of the young and the rebellious in American society. The een well established. Clearly the precise amount of use will vary enormously, the community and the availability of the drug. According to studies of some incident of use on the West Coast, as compared with the Eastern Seaboard. Its to colleges, high schools and ghetto areas. It has invaded middle- and upper-class ies, as well as the Armed Forces. In Vietnam, an estimated 20% of the troops use use you must also consider the frequency of the use. In several studies, it was 70% of the users used it on no more than five occasions.

g to Donald B. Louria, M.D., has reached a plateau and will soon decline. His rters have attempted to create a bandwagon philosophy, trying to convince potential sing it, that it must, therefore be relatively safe and that they, the uninitiated, wing coterie. He also writes of a growing use of the stimulants and other hall-

can be explained by the enormous profits which can be realized. The dependence fects are also a contributing factor to their growing abuse.

the Current Scene:

society is ugly, without taste, filthy and reprehensibly materialistic. Its values ypocritical, constricting and dehumanizing. The alienated make a fetish of immediacy, , and trumpet their complete repudiation of anything which to them smacks of materialism, r premeditation. Life is unhappy, lonely, meaningless and boring. They reject with teaching establishment and virtually every facet of our society. Description of an One, he has a tendency to live in the present and to avoid commitment to people,

causes, or ideas. All gratification is immediate, the future is felt to hold nothin
thirty is considered synonymous with emotional and experiential death. Two, there i
communication with parents or other adults. Three, he has an ill-defined concept of
perpetual inner turmoil, it results in his continually asking but never answering su
where he is going, what the meaning of his life is and what his role in society shou
search for identity. Four, there is a tendency toward sudden severe depression, whi
attempts of suicide. Five, there is an inability to concentrate or to study. Six,
but ungratifying.

Thus, the alienated student hates society, rejects his family, distrusts everyone, a
chronic identity crisis, and an inability to respect himself, he is incapable of giv
Uncertain of who he is, convinced life is meaningless, unable to participate in goal
a lost soul wandering from sensate experience to sensate experience. He frequently
with enormous enthusiasm, but in reality they are no more meaningful to him than the
and consequently he attempts in some way to enhance them, beautify them, or invest
meaning. His use of drugs such as LSD is an attempt to do just that, as well as to
the regulations of society. Today, he is often to be found among the hippies, oste
time doing his thing. But for the alienated it is all facade. No cult of experien
to change his pervasive pessimism and unhappiness.

The alienated young person is obviously especially susceptible to the blandishments
is an almost equal danger for the young person who is exceedingly influenced by the
peer group. In fact, among the large number of factors that influence an individual
to use drugs, there is none quite so insidious as the drug-using peer group. The d
is found equally on the littered and fetid streets of urban slums and on charming,
The old concept of the venal purveyor of drugs waiting outside the school yard to e
youngster into the ravages of drug abuse is today (and has been for quite some time
concept. In the slums of Harlem where heroin use abounds, it is the drug user who

III.A Who are drug abusers?

Although much is known about the effects of drugs with abuse potential, the user hi
Slum conditions, easy access to drugs, peddlers and organized crime have all been b
While any of these factors may contribute, no single cause no single set of conditi
dependency, for it occurs in all social and economic classes. The key to the riddl
the abuser and any one of many sets or conditions. Authorities found that drug dep
generally noncompetitive individuals who preferred to handle their anxieties by avo

TEACHER INFORMATION (continued)

fication is immediate, the future is felt to hold nothing and reaching the age of
ous with emotional and experiential death. Two, there is an almost total lack of
r other adults. Three, he has an ill-defined concept of self. He suffers from
results in his continually asking but never answering such questions as, who he is,
meaning of his life is and what his role in society should be. His is the constant
there is a tendency toward sudden severe depression, which may, of course, lead to
there is an inability to concentrate or to study. Six, sexual behavior is promiscuous

hates society, rejects his family, distrusts everyone, and, torn by anxieties, a
d an inability to respect himself, he is incapable of giving or accepting love.
vinced life is meaningless, unable to participate in goal-directed activity, he is
sensate experience to sensate experience. He frequently reports these experiences
ut in reality they are no more meaningful to him than the rest of his empty life,
s in some way to enhance them, beautify them, or invest them with some sort of
such as LSD is an attempt to do just that, as well as to show his utter disdain for
Today, he is often to be found among the hippies, ostensibly having a wonderful
for the alienated it is all facade. No cult of experience, no drug, no fad is likely
ssimism and unhappiness.

is obviously especially susceptible to the blandishments of the drug cult, but there
for the young person who is exceedingly influenced by the actions and opinions of his
g the large number of factors that influence an individual's decision whether or not
e quite so insidious as the drug-using peer group. The domination of the peer group
ttered and fetid streets of urban slums and on charming, rustic college campuses.
al purveyor of drugs waiting outside the school yard to entice some unsuspecting
of drug abuse is today (and has been for quite some time) a totally anachronistic
Harlem where heroin use abounds, it is the drug user who makes other drug users.

~~ut~~ the effects of drugs with abuse potential, the user himself remains the enigma.
ss to drugs, peddlers and organized crime have all been blamed for the problem.
may contribute, no single cause no single set of conditions clearly leads to drug
in all social and economic classes. The key to the riddle may well lay within
many sets or conditions. Authorities found that drug dependent persons were
ndividuals who preferred to handle their anxieties by avoiding the situations that

provoked them. True, drug dependency cannot develop without a chemical age
exposed to drugs by reason of medical need, relatively few of these people t
true that in metropolitan areas there are invariably found groups of "hard-c
of the young persons who use drugs in the ghetto areas. Even though drugs m
in metropolitan areas, only a small percentage of the individuals exposed jo

In general, drug abusers fall into four main groups. The first group employ
"situational" purpose. Such as the student who uses amphetamines to keep aw
who uses anti-obesity pills for additional energy to get through household
amphetamines to keep awake while driving all night to an early morning appoi
or may not exhibit psychological dependence.

The second group consists of "spree" users, usually of college or junior hig
Drugs are used for "kicks" or just the experience. There may be some degree
but little or no physical dependence (depending upon the drug) because of th
of use. Some "spree" users may only try drugs once or twice and decide the
Drug sprees constitute a defiance of convention, an adventurous daring expe
fun. Unlike "hard-core" abusers, who often pursue their habits alone or in
take drugs only in groups or at social functions.

The third is the "hard-core" dependent. His activities revolve almost enti
securing supplies. He exhibits strong psychological dependence on the drug
dependence when certain drugs are being used. Typically, the hard-core abu
basis. He has been on drugs for some time and presently feels that he canno

A new type of drug abuser has emerged in the past few years that makes up t
or hip group. These drug users tend to believe that the systems of today a
and a new way of life should be found. Drugs are an integral part of the h
considered the same as the "hard-core" abusers. The major difference is th
slum areas, but from middle or upper-middle income families and their educa
the ghetto dweller. With some their purpose is often more specifically "to
Whether the "insight" is true or merely imagined is still the subject of me
tion, and perhaps it depends on individual cases.

Obviously, there is much overlapping between these groups, and a "spree" us
deteriorate to the "hard-core" group, or become enmeshed in the "hippie" p
occurs when the interaction between drug effects and a personality causes a
The drug becomes a means of solving or avoiding life's problems.

TEACHER INFORMATION (continued)

, drug dependency cannot develop without a chemical agent. Yet, while millions are
reason of medical need, relatively few of these people turn to a life of drugs. It is
litan areas there are invariably found groups of "hard-core" users and a large proportion
who use drugs in the ghetto areas. Even though drugs may be available on street corners,
s, only a small percentage of the individuals exposed join the ranks of abusers.

sers fall into four main groups. The first group employs drugs for a specific or
e. Such as the student who uses amphetamines to keep awake at exam time; the housewife
y pills for additional energy to get through household chores; the salesman who uses
awake while driving all night to an early morning appointment. Such individuals may
sychological dependence.

nsists of "spree" users, usually of college or junior high through high school age.
"kicks" or just the experience. There may be some degree of psychological dependence,
ysical dependence (depending upon the drug) because of the sporadic and mixed pattern
e" users may only try drugs once or twice and decide there are better things in life.
ute a defiance of convention, an adventurous daring experience, or a means of having
core" abusers, who often pursue their habits alone or in pairs, spree users usually
groups or at social functions.

ard-core" dependent. His activities revolve almost entirely around drug experience and
He exhibits strong psychological dependence on the drug, often reinforced by physical
tain drugs are being used. Typically, the hard-core abuser began drug abuse on a spree
on drugs for some time and presently feels that he cannot function without drug support.

abuser has emerged in the past few years that makes up the fourth group--the "hippies"
e drug users tend to believe that the systems of today are either antiquated or wrong
fe should be found. Drugs are an integral part of the hippie life and they could be
as the "hard-core" abusers. The major difference is that most hippies do not come from
m middle or upper-middle income families and their educational level is far above that of
With some their purpose is often more specifically "to gain psychological insight."
t" is true or merely imagined is still the subject of medical and psychological examina-
t depends on individual cases.

much overlapping between these groups, and a "spree" user or "situational" user may
"hard-core" group, or become enmeshed in the "hippie" philosophy. The transition
eraction between drug effects and a personality causes a loss of control over drug use.
means of solving or avoiding life's problems.

Slum sections of large metropolitan areas still account for the largest number But frustration, immaturity, and the emotional deprivation are not peculiar to and the misuse of drugs by middle and upper economic class individuals is being frequency. Drug dependence is not discriminating. A drug, an individual, an e use, and a personality deficiency are the key factors in its development.

III.B Why are some people drug abusers?

Some of the more common reasons can be recited but there are as many causes for individuals abusing drugs.

PARENTAL CONTROL is a factor in many adolescent disturbances. Excessive discip as lack of discipline.

PERMISSIVE SOCIETY - Throughout society we are experiencing a wave of tolerance new standards are replacing them. Styles of dress which are now common would h decade ago. With this permissiveness has developed an attitude rejecting respo other than oneself; certainly, non toward the society at large.

AFFLUENCE - It is possible for opposing conditions to bring about the same resu lack of it can both lead to experimentation with drugs. A wealthy youngster, s pleasure can easily turn to drugs as a new experience in a dull, jaded life. T may provide a unique thrill for a youngster who has experienced every material

POVERTY - The unhappy offspring of a ghetto welfare family may also be drawn to different reason. The need to forget hunger and misery can be satisfied, at le contents of a small capsule. This becomes his means of escape from the dull ro

REBELLION AGAINST OLDER GENERATION - Every new generation feels a need to rebel In establishing an identity, they must create their own world. This includes n morals. As a gesture of deliberate defiance to the old, these values may purpo of conduct.

CURIOSITY AND DESIRE TO EXPERIMENT - The natural curiosity of all growing anima of drug abuse. This natural desire to experiment is helped along by our own ed by doing. This very valid concept has created the undesirable by-product of en and casting a shadow of doubt on the pronouncements of others. This condition

TEACHER INFORMATION (continued)

tropolitan areas still account for the largest number of known heroin abusers.
ty, and the emotional deprivation are not peculiar to depressed neighborhoods,
y middle and upper economic class individuals is being recognized with increasing
ce is not discriminating. A drug, an individual, an environment which predisposes
ficiency are the key factors in its development.

abusers?

easons can be recited but there are as many causes for drug abuse as there are
s.

tor in many adolescent disturbances. Excessive discipline may be just as damaging

oughout society we are experiencing a wave of tolerance. Old values are crumbling and
ing them. Styles of dress which are now common would have been cause for alarm a
ermissiveness has developed an attitude rejecting responsibilities toward anyone
ainly, non toward the society at large.

le for opposing conditions to bring about the same results. An excess of money or a
to experimentation with drugs. A wealthy youngster, surrounded by every possible
to drugs as a new experience in a dull, jaded life. The excitement of illegality
ill for a youngster who has experienced every material benefit of life.

fspring of a ghetto welfare family may also be drawn to the use of drugs, but for a
eed to forget hunger and misery can be satisfied, at least temporarily, with the
ule. This becomes his means of escape from the dull routine of his limited world.

GENERATION - Every new generation feels a need to rebel against what has gone before.
ity, they must create their own world. This includes new values, new goals, and new
deliberate defiance to the old, these values may purposely reject established standards

EXPERIMENT - The natural curiosity of all growing animals contributes to the problem
ural desire to experiment is helped along by our own educational philosophy of learning
id concept has created the undesirable by-product of encouraging self experimentation
doubt on the pronouncements of others. This condition has been compounded by the

credibility gap which exists in narcotics education. Frequently the student has m teacher. The frantic use of undocumented beliefs and dire warnings has also contr in today's student. Statements such as "take one marijuana cigarette and you'll d the problem which now faces educators.

SOCIAL PRESSURE BY PEER GROUP - Another factor in teenage use of drugs is the stro their peers. The developing teenager has a strong need for acceptance by his frie indulge in drugs in order to gain that acceptance and recognition from the group. that if such activity is the price of admission to a desired social circle, the in has chosen that group, knowing of its anti-social circle and anti-social activitie conditioned to accept drug abuse as desirable.

Social pressure will sometimes be offered as an excuse or rationalization by the y discuss his own drug use problem. The statement "I smoke pot because everybody is self serving. "Everyone" is not smoking pot, and the teenager who believes this i as those who listen to him.

ESCAPE FROM PRESSURES OF ADOLESCENCE - The adolescent period is one of the most di The frustrations and insecurity of reaching for adulthood is sometimes overpowerin youth cannot face the challenge alone. If parents are incapable of providing guid to drugs as an escape from the pressures of growing up.

ADULT ACK OF SELF CONFIDENCE - Most adult drug users face a similar problem. The unable to establish an identity in life, and are afraid to face the world on their use of drugs becomes a crutch to see them over the rough spots in life. Like the make mature decisions, and regardless of age, remain in a dependent state for year

ADULT DRUG CULTURE - For many youthful drug users, the first contact with the worl own home. We are living in a drug culture. A variety of dangerous pills are avai cabinet and children are conditioned to the wholesale drug use of their parents. family members to rely on the artificial chemistry of pills as a regular part of d

A significant factor leading to drug use is simply AVAILABILITY. Teenagers today and spending money than ever before. If they develop a desire for the use of drug drugs is usually near at hand. No part of the country is completely free and area campuses, and international borders, are particularly susceptible.

Any one user will probably be affected by several related causes, and the precedin Frequently the user will not be aware of the factors which initiated his use and l in drug abuse. In almost every instance, he will be aware that he is embarking on Almost every addict began the use of drugs willingly. Rarely is one forced or tri tion.

TEACHER INFORMATION (continued)

ts in narcotics education. Frequently the student has more valid information than the
of undocumented beliefs and dire warnings has also contributed to the distrust reflected
ments such as "take one marijuana cigarette and you'll die" have played a roll in sowing
s educators.

OUP - Another factor in teenage use of drugs is the strong social pressure exerted by
ng teenager has a strong need for acceptance by his friends. If necessary they will
to gain that acceptance and recognition from the group. It should be recognized however,
he price of admission to a desired social circle, the individual seeking admission
wing of its anti-social circle and anti-social activities. He has thus been pre-
abuse as desirable.

imes be offered as an excuse or rationalization by the youngster who is brought to
roblem. The statement "I smoke pot because everybody is doing it" is misleading and
is not smoking pot, and the teenager who believes this is deceiving himself as much
.

DOLESCENCE - The adolescent period is one of the most difficult in a person's life.
urity of reaching for adulthood is sometimes overpowering to the extent that the
llenge alone. If parents are incapable of providing guidance the teenager may look
the pressures of growing up.

NCE - Most adult drug users face a similar problem. They lack self confidence, are
ntity in life, and are afraid to face the world on their own resources. For them, the
tch to see them over the rough spots in life. Like the teenager, they are unable to
regardless of age, remain in a dependent state for years.

any youthful drug users, the first contact with the world of pills is made in their
in a drug culture. A variety of dangerous pills are available in almost any medicine
onditioned to the wholesale drug use of their parents. It is not uncommon for some
the artificial chemistry of pills as a regular part of daily life.

ing to drug use is simply AVAILABILITY. Teenagers today have more freedom, mobility,
ver before. If they develop a desire for the use of drugs, the opportunity to obtain
hand. No part of the country is completely free and areas near large cities, college
al borders, are particularly susceptible.

y be affected by several related causes, and the preceding list is incomplete.
not be aware of the factors which initiated his use and led him to continue further
every instance, he will be aware that he is embarking on a dangerous pastime.
the use of drugs willingly. Rarely is one forced or tricked into his first experimenta-

IV. Is drug abuse costly?

ITS ADDED RESPONSIBILITY - The problem of drug abuse is widespread. It invol
of criminals and "dope fiends." Many reputable people in the real, close-at-
web of drug abuse. But the real cost of the problem is found not just in the
productive society. Drug abuse feeds millions of dollars into organized cri
of dollars in property loss and places the burden of responsibility on the r
members.

No one really knows how many drug addicts there are in this country, but the
approximately one narcotic addict among every 3,157 persons. Most of the ad
York, California, Illinois, and New Jersey, where the bulk of our population
addicts are to be found between the ages of 21 and 30.

The average addict spends approximately $15 each day for a narcotic drug. T
of $5,475, but some addicts have developed a $100 a day habit, which is far

The marijuana user claims no need to be concerned about the environmental da
reality - "What to do, where to go, what am I allowed to do" - and has retur
primitive child who wanders in happiness. How far can one go in his search
sibility and for a childlike response? This depends to a great extent upon
that must tolerate and care for him if he decides to drop out. While men ma
apparently emerge with a continued dedication to the realities of life, ther
make this transition; such persons may become social nonentities or liabilit
been the agent that turned a productive person into a useless social burden.

SOCIAL ASPECTS - If our adult population would abjure reacting to every phys
pill, capsule or needle, then our young people would be far better insulated
the drug proponents. It is our wealth too that has allowed us to become a n
chondriacs and to become to such a large extent a sensate society. A sensat
concept that the only true reality and value is sensory. That which has rea
smelled, touched, tasted or otherwise physically perceived. The inevitable
are the ascendancy of hedonism and of selfish materialism, the here and now
behavior or deferred gratification. To maintain the pleasure principle, one
in unceasing succession. In a society in which the acquisition of wealth an
than the means by which these are achieved, in a culture for which sensory
important than ideals or constructive activity. it is inevitable that where
will form an intrinsic part of the search for kicks, or as it is more euphem
experience.

TEACHER INFORMATION (continued)

e problem of drug abuse is widespread. It involves not just a distant world
." Many reputable people in the real, close-at-hand world are caught in the
eal cost of the problem is found not just in the number of people lost to a
se feeds millions of dollars into organized crime, causes hundreds of thousands
nd places the burden of responsibility on the rest of society to reclaim its

drug addicts there are in this country, but the known recorded addicts number
ddict among every 3,157 persons. Most of the addicts are in four states, New
nd New Jersey, where the bulk of our population is also.. Nearly half of the
en the ages of 21 and 30.

roximately $15 each day for a narcotic drug. This amounts to a yearly figure
ave developed a $100 a day habit, which is far too extreme a cost to provide for.

need to be concerned about the environmental dangers, he has turned off adult
to go, what am I allowed to do" - and has returned to the life of the free,
in happiness. How far can one go in his search for total freedom from respon-
response? This depends to a great extent upon the individual and the society
for him if he decides to drop out. While men may take the marijuana trip and
tinued dedication to the realities of life, there may be far more who cannot
ersons may become social nonentities or liabilities, and cannabis will have
productive person into a useless social burden.

t population would abjure reacting to every physical and mental stress with a
n our young people would be far better insulated against the blandishments of
our wealth too that has allowed us to become a nation of pill-taking hypo-
such a large extent a sensate society. A sensate society is oriented to the
eality and value is sensory. That which has reality and value must be heard,
otherwise physically perceived. The inevitable consequences of this philosophy
sm and of selfish materialism, the here and now predominating over goal-directed
ication. To maintain the pleasure principle, one thrill must replace another
a society in which the acquisition of wealth and power are far more important
e are achieved, in a culture for which sensory and physical pleasures are more
nstructive activity. it is inevitable that where drugs become freely available they
of the search for kicks, or as it is more euphemistically entitled, the cult of

In the ghettos of this country the drugs are used not simply for kicks but
One author writes that he is more impressed that so many people in this env
than by the fact that large numbers do turn to them.

Both in the ghettos and the affluent suburban communities of this country,
may explain many of the ills of our society. For here, perhaps, is the pri
twentieth century.

The divorce rate in our society has increased progressively over the last t
there are approximately 500,000 divorces every single year. One out of eve
divorce or annulment, and to this, one must add the substantial number in w
formalized by either divorce or annulment procedures.

The problem is not likely to abate. Young married couples are entirely awa
up to expectation it is easy to break up a marriage and start over again.
abrogated its educational responsibilities. During the nineteenth century,
an extraordinarily large portion of the children's education. Today's obj
might have been tolerable if the schools had adequately replaced parental ed
has not happened. Indeed, in our public schools in urban centers, disciplin
education is becoming almost impossible. Although some individual teachers
role, many others do not, and in any case the influence of the teacher is n
of the parent. Even if the school and the teachers can maintain discipline
which the parents have relinquished responsibility, those children who grow
at great disadvantage. They have no pride in their family to fall back on,
support them and, equally important, no established parental guidelines, so
right and wrong, between wants and needs, are blurred, making them more sus
of the drug cult. When a user or proselytizer of drugs urges them to try m
likely to feel that they should refuse because their parents would not appr
influence as important in the development of an individual as the family un
an indifference that is absolutely appalling, are allowing that unit to con

CRIME RELATED COSTS - Because most addicts cannot obtain the cash to buy th
crime. Most convert stolen merchandise into cash. It takes about $3 to $
So to support a $15 a day habit, the addict has to steal $50 worth of prope
Assuming all addicts in the country use this method - and they don't (some
burglary, forgery, theft of legitimate drugs or illegal production of drugs
worth of merchandise must be stolen to provide narcotics for this country's

TEACHER INFORMATION (continued)

ountry the drugs are used not simply for kicks but as an escape from a blighted reality. e is more impressed that so many people in this environment appear to resist drugs rge numbers do turn to them.

the affluent suburban communities of this country, the deterioration of the family ills of our society. For here, perhaps, is the primary American tragedy of the

society has increased progressively over the last three decades until at present 500,000 divorces every single year. One out of every four marriages ends either in d to this, one must add the substantial number in which family breakup is not orce or annulment procedures.

y to abate. Young married couples are entirely aware that if reality does not live easy to break up a marriage and start over again. The family has also increasingly l responsibilities. During the nineteenth century, the family was responsible for e portion of the children's education. Today's objection of educational obligations e if the schools had adequately replaced parental educational functions. But this ed, in our public schools in urban centers, discipline is often so lax that effective lmost impossible. Although some individual teachers serve in an effective avuncular t, and in any case the influence of the teacher is no substitute for the influence the school and the teachers can maintain discipline and can effect the education for relinquished responsibility, those children who grow up in broken or unhappy homes are They have no pride in their family to fall back on, no parental unit to advise and ly important, no established parental guidelines, so that the boundaries between n wants and needs, are blurred, making them more susceptible to the blandishments a user or proselytizer of drugs urges them to try marijuana or LSD, they are less y should refuse because their parents would not approve. There can be no other in the development of an individual as the family unit; yet as a society we, with absolutely appalling, are allowing that unit to continue its progressive deterioration.

ecause most addicts cannot obtain the cash to buy their drugs legally, they turn to olen merchandise into cash. It takes about $3 to $5 in stolen goods to get $1 cash. ay habit, the addict has to steal $50 worth of property a day or $18,250 a year. the country use this method - and they don't (some rely on prostitution, shoplifting, t of legitimate drugs or illegal production of drugs) - more than one billion dollars st be stolen to provide narcotics for this country's addict population each year.

The taxpayer also pays the bill to rehabilitate the addict. A research psychiatris
indicates it costs his state approximately $1,300 a year to rehabilitate just one a
program estimate six weeks of in-patient treatment followed by aftercare totals $3,
treatment programs were available to all addicts in the country, society would pick
$83,214,300 to $192,033,000. To add to this high cost is the high recidivism of th
Their rate of return to drugs, as reported from the federal hospitals, is in the 90
report a much higher percent of success but may be working under more ideal circumst
core addict.

Of the non-addicting drugs we select cannabis to determine if it does cause a perso
us exclude from the definition of criminality in this instance the violation of ant
such violation is criminal in the United States, the charge of criminality as it rel
cannabis association has to do with crimes of violence - murder, rape, assault - an
understand what is mean by "cause." Direct causal relationships are very hard to p
must ask was the crime caused by cannibis, and then we must ask in general whether
cannabis and crime is sufficiently frequent and widespread to justify general state
relationship between the drug and crime.

One attorney writes describing four ways criminal activity can be stimulated by can
by certain criminals to fortify their courage prior to committing crimes, 2) by cau
of general mental derangement and demoralization after chronic use of cannabis (usu
precipitating criminal behavior because marginally adjusted persons lower their inh
aggressive and anti-social tendencies, and 4) by causing crimes resulting from pani
induced in otherwise normal persons who react adversely to the drug's effects.

It is difficult to tell how many persons actually indulge in crime either aided or
Police files are full of such cases, yet one must always question whether or not th
adjunct rather than the cause of the problem. Police authorities generally take th
causal relationship between marijuana and crime and that the two are in any case ve
When the police hear that "only a few" users become involved with crime they wonder
few so constantly. And in truth, there is a considerable gap between the experienc
his university office, or the psychiatrist in his handsomely appointed quarters on
on the street on the other. It may not be so much that one or the other is wrong a
different circles.

Let us review what cannabis does to the mind: Release of inhibitions, distortion o
increased response to suggestion, production in susceptible people of illusions and
to anti-social behavior, impairment of memory, distortion of emotional responsivene

TEACHER INFORMATION (continued)

he bill to rehabilitate the addict. A research psychiatrist for one treatment program
state approximately $1,300 a year to rehabilitate just one addict. Doctors in another
eks of in-patient treatment followed by aftercare totals $3,000. Just assuming these
available to all addicts in the country, society would pick up a tab ranging from
,000. To add to this high cost is the high recidivism of the rehabilitated addict.
drugs, as reported from the federal hospitals, is in the 90% plus range, other agencies
rcent of success but may be working under more ideal circumstances and with a less hard-

ugs we select cannabis to determine if it does cause a person to become a criminal. Let
inition of criminality in this instance the violation of anti-cannabis laws. Although
nal in the United States, the charge of criminality as it relates to the argument of
s to do with crimes of violence - murder, rape, assault - and with theft. First we must
by "cause." Direct causal relationships are very hard to prove, as in every case we
caused by cannibis, and then we must ask in general whether the association between
ufficiently frequent and widespread to justify general statements about a causal
e drug and crime.

cribing four ways criminal activity can be stimulated by cannabis. 1) By being used
fortify their courage prior to committing crimes, 2) by causing crimes to occur because
gement and demoralization after chronic use of cannabis (usually hashish), 3) by
behavior because marginally adjusted persons lower their inhibitions and thus stimulate
ial tendencies, and 4) by causing crimes resulting from panic, confusion, or anger
rmal persons who react adversely to the drug's effects.

how many persons actually indulge in crime either aided or caused by the use of cannabis.
f such cases, yet one must always question whether or not the use of the drug was an
cause of the problem. Police authorities generally take the hard line that there is a
tween marijuana and crime and that the two are in any case very frequently associated.
hat "only a few" users become involved with crime they wonder how they keep meeting that
in truth, there is a considerable gap between the experiences of the sociologist in
or the psychiatrist in his handsomely appointed quarters on the one hand, and the police
ther. It may not be so much that one or the other is wrong as that they just move in

nabis does to the mind: Release of inhibitions, distortion of perception and judgement,
suggestion, production in susceptible people of illusions and delusions that predispose
r, impairment of memory, distortion of emotional responsiveness, irritability and confusion

and a predisposition to anxiety and aggressiveness as a possible result of various derangements - taken from the 1965 report of the Committee on Drug Dependence of th

Marijuana can produce psychotic reaction (this is a medical fact) and a psychotic s and precipitate criminal behavior. This is not to say that it will in every case, Because of the relative mildness of Mexican and American varieties of cannabis we h kind of cannabis-induced reaction. But with the coming of more potent oriental va hashish, we can look for more and more instances of psychosis and violence as a res

V. What is the fight against drug traffic?

A. History (see also information under each drug)

In the eighteenth century, the Chinese Emperor, Yung Chen, became so concerned prohibited the smoking of it. However, addiction had become so prevalent by t were for the most part ignored. This was probably the earliest attempt at leg drugs.

A chronological list of some of the steps taken to control narcotics use in th

1906 - Federal Pure Food and Drug Act. This Act regulated the use of pate containing opiates.
1914 - Harrison Narcotic Act. This regulated the manufacture and distribu cocaine and other narcotics.
1922 - Narcotic Drugs Import and Export Act. This provided heavy penaltie import and export of narcotics.
1930 - Establishment of the Bureau of Narcotics within the Treasury Depart bureau's major function was to administer laws related to the traff narcotic drugs
1937 - Marijuana was placed under control of federal legislation.
1944 - Demerol, a synthetic substitute for morphine, was placed under the of federal legislation.
1946 - Harrison Narcotic Act Amendment. The original act of 1914 was amen include synthetic substances having addiction-forming or addiction- ing qualities similar to cocaine or morphine.
1960 - Narcotic Manufacturing Act.

TEACHER INFORMATION (continued)

to anxiety and aggressiveness as a possible result of various intellectual and sensory from the 1965 report of the Committee on Drug Dependence of the World Health Organization.

psychotic reaction (this is a medical fact) and a psychotic state can release violence nal behavior. This is not to say that it will in every case,,but that it can and has. ive mildness of Mexican and American varieties of cannabis we have seen very little of this ced reaction. But with the coming of more potent oriental varieties, with the coming of for more and more instances of psychosis and violence as a result of cannabis use.

ainst drug traffic?

information under each drug)

century, the Chinese Emperor, Yung Chen, became so concerned about opium abuse that he moking of it. However, addiction had become so prevalent by this time that his demands part ignored. This was probably the earliest attempt at legal control of the abuse of

list of some of the steps taken to control narcotics use in the United States follows:

al Pure Food and Drug Act. This Act regulated the use of patent medicines
ining opiates.
son Narcotic Act. This regulated the manufacture and distribution of morphine,
ne and other narcotics.
tic Drugs Import and Export Act. This provided heavy penalties for illegal
t and export of narcotics.
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son Narcotic Act Amendment. The original act of 1914 was amended to
de synthetic substances having addiction-forming or addiction-sustain-
ualities similar to cocaine or morphine.
tic Manufacturing Act.

1962 - White House Conference. More than 400 experts from various fiel
medicine, science, law enforcement, research pharmacology, socia
education, and others, met in Washington, D.C., to discuss and p
information concerning the problems of narcotic and drug abuse.

1965 - The Drug Abuse Control Amendments. These amendments provided fo
stronger regulation of the manufacture, distribution, delivery,
possession of stimulant, depressant, and other psychotoxic drugs
The Food and Drug Administration was given stronger enforcement
powers to prevent drug counterfeiting. These amendments became
effective February 1, 1966.

1966 - The Bureau of Drug Abuse Control. This separate bureau was orga
to carry out the responsibilities of the Food and Drug Administr
tion under the Drug Abuse Control Amendments of 1965. The major
functions of the bureau are case assistance, investigations, and
studies and statistics.

1968 - Drug Abuse Control Amendments to Federal Food, Drug and Cosmetic
of 1965, increase the penalties for anyone who illegally produce
sells or disposes of dangerous drugs and imposes misdemeanor pen
for possession.

1969 - A Supreme Court decision removed two of the Federal Government's
major legal weapons against marijuana traffic when it held that
the Marihuana Tax Act is unenforceable when the accused claims
Fifth Amendment privilege against self-recrimination. Also it
declared as unreasonable the law's presumption that a man with
marijuana in his possession knows that it was imported illegally
thus violating due process of law.

B. International

Halting the traffic in drugs is essentially a global problem. If the growt
tion of drugs could be limited strictly to the amounts and channels needed
purposes, the problems could be minimized. Since 1912 efforts at internati
through compacts among countries. These accords, reached first in the Leag
United Nations, have succeeded in greatly reducing the sources of drugs, bu
in the international suppression of illicit traffic.

TEACHER INFORMATION (continued)

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could be limited strictly to the amounts and channels needed for medicinal and research
problems could be minimized. Since 1912 efforts at international control have been made
cts among countries. These accords, reached first in the League of Nations and then in the
s, have succeeded in greatly reducing the sources of drugs, but there are many loopholes
ational suppression of illicit traffic.

In some countries - notably the greatest producers of plants from which narcot
are inadequate laws against selling or using narcotics, or else the laws are s
virtually inoperative. In some lands opium smoking and eating is tolerated mu
drinking of alcohol. Although these countries try conscientiously, their atte
and export of narcotics are sometimes feeble.

The amount of opium produced annually is estimated to be at least four times t
medicinal and research purposes throughout the world. A chain of illicit proc
points in the Near East, France, and Italy transforms the illegal over-product
into morphine and heroin. Burma, Laos, Thailand, and China also produce opium
of the illegally manufactured narcotics finds its way to the United States, wh
them are the highest.

The legal price for opium is fixed by the Turkish government at about $7.50 a
farmer who sells his product on the black market gets at least twice that am
through many hands as it moves along the lines of illicit traffic, jumping in
When heroin, derived from the raw opium, finally reaches American addicts the
$19,000 a pound.

On the legal front of the fight against narcotics, certain international, nat
bulwarks have been built to control their flow and use.

The United Nations has several agencies which administer voluntary controls o
of the narcotics in producing countries. The PERMANENT CENTRAL OPIUM BOARD a
have made careful studies of the legitimate needs for narcotics throughout th
signed by various countries, including the United States, they encourage prod
limited to those needs. The COMMISSION ON NARCOTIC DRUGS gives technical ass
it. The WORLD HEALTH ORGANIZATION helps by disseminating information and int
medical and health standards.

The success of these activities, beset as they are by the delays, inadequacie
sidetrackings of any voluntary international effort, has been impressive. Se
Iran, have banned opium production altogether (although they have not yet bee
countries still producing narcotics have, at the suggestion of the UN, reduce
controls of the drugs have been deemed insufficient or badly enforced, and th
transshipment points in the illegal drug traffic.

TEADHER INFORMATION (continued)

ly the greatest producers of plants from which narcotic drugs are derived - there ist selling or using narcotics, or else the laws are so poorly enforced as to be n some lands opium smoking and eating is tolerated much as we tolerate the hough these countries try conscientiously, their attempts to restrict production re sometimes feeble.

uced annually is estimated to be at least four times that needed for legitimate rposes throughout the world. A chain of illicit processing and transshipping France, and Italy transforms the illegal over-production from Turkey and Iran . Burma, Laos, Thailand, and China also produce opium on a large scale. Much tured narcotics finds its way to the United States, where the prices paid for

n is fixed by the Turkish government at about $7.50 a pound. But the opium poppy oduct on the black market gets at least twice that amount. The product then passes moves along the lines of illicit traffic, jumping in price with each transaction. n the raw opium, finally reaches American addicts the estimated price is about

e fight against narcotics, certain international, national, state, and local to control their flow and use.

everal agencies which administer voluntary controls on the growth and processing ucing countries. The PERMANENT CENTRAL OPIUM BOARD and the DRUG SUPERVISORY BODY s of the legitimate needs for narcotics throughout the world. Armed with treaties ies, including the United States, they encourage production and distribution quotas The COMMISSION ON NARCOTIC DRUGS gives technical assistance to countries requesting GANIZATION helps by disseminating information and internationally agreed-upon ards.

ivities, beset as they are by the delays, inadequacies, and occasional selfish untary international effort, has been impressive. Several countries, such as production altogether (although they have not yet been able to wipe it out). Those g narcotics have, at the suggestion of the UN, reduced exports to countries where ve been deemed insufficient or badly enforced, and therefore are suspected of being the illegal drug traffic.

The INTERNATIONAL CRIMINAL POLICE ORGANIZATION (INTERPOL), despite its name, does no to enforce any laws against the narcotics traffic. But it has played a great part b house for information about crimes and criminals. This it disseminates from its hea to police departments all over the world.

War by our federal government against the drug traffic is centered in the Treasury D the Customs Bureau and the Bureau of Narcotics have the responsibility of enforcing field. The customs men, of course, have the job of keeping illicit drugs from being seaports and airports and across our borders.

The vast majority of amphetamines and barbiturates in the illicit traffic is diverte A portion of illicit amphetamines and barbiturates is smuggled into the United State may have been produced in secret Mexican laboratories or legitimately manufactured o from legally produced U.S. stocks. Drugs intended for medicinal use have been diver drug trade by dishonest plant employees, by over-production, and thefts from supplie hospitals, pharmacies, and persons licensed to handle the drugs. Other portions of t originate in clandestine laboratories, operating illegally in garages, basements, wa trucks. Some registered manufacturers, under the cloak of legality, make quantities unlawfully and dispose of them through the black market trade. The illegal "bulk pe hundreds of thousands of capsules and tablets is an important link in the traffice i

Since there is no legal production of hallucinogenic drugs in the United States, the depends on production from illicit laboratories or smuggled drugs from Europe, Mexic Australia.

C. Duties and limitations of enforcement

Some facets of the Federal Bureau of Narcotics work - for example, a number of spect contraband drugs and apprehension of members of criminal rings - have received high hand, some medical and other experts criticize various aspects of the law enforcemen drugs, including (a) alleged pressure by the Bureau of physicians, that in effect li as to what constitutes proper medical treatment of addicts, and (b) the strict limit provisions of the laws place on handling each narcotic offender's case on its merits often permit a judge no choice but imprisonment of addicts, even when he may think t hospitalization would be wiser. The Advisory Council of Judges of the National Cou Delinquency has strongly urged the elimination of mandatory terms.

TEACHER INFORMATION (continued)

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ld be wiser. The Advisory Council of Judges of the National Council of Crime and
ongly urged the elimination of mandatory terms.

The continual development of new drugs also obviously greatly complicates the pr
Just laws and properly adjusted penalties can only grow out of a continuing dial
judiciary, and legislative branches, law enforcement agencies and medical societ
treat pushers and sellers as if they were users, and demonstrate inadequate know
the drug racket. Sometimes even the most venal criminals who were not addicted
profits in the drug business have been given surprisingly light sentences. If t
is to be reduced, the penalties meted out to the smugglers, distributors and pu
and optent hallucinogens, must be very severe. Furthermore, it seems some form
wiretapping should be permitted for cases of illicit importation, sale, manufact
dangerous drugs including heroin, potent hallucinogens and central stimulants of
There is absolutely no reason for our society not to be able to come to grips wi
protect itself from criminal elements and at the same time protect the individua
ference with his privacy.

Is the government doing its part? On the whole, police work aimed at the non-us
is in business only for the high profit - is efficient and productive. But gett
not getting him into jail. To have a case against a pusher, the police must hav
dictating how evidence may be seized are a basic constitutional protection, fram
recent years, the U.S. Supreme Court has broadened its interpretation of these l
times seizure has seemed all but impossible to frustrated law enforcement office
laws we need," a Federal Narcotics Bureau official observed recently, "often we'
administration of the laws we've got."

Because of the criminal nature of illegal drug traffic, new powers are vested in
the law, the investigators can seize counterfeit drugs, serve warrants, and arre
in illegal drug operations. They are also allowed to carry firearms for the fir

D. Private companies and individuals

Some manufacturers have instituted controls to prevent their pills from turning
Smith, Kline & French, for example, sell pills only to selected wholesalers; the
around their boxes, to prevent identification of the contents during shipment an
and they mark pills made in their Mexican laboratories with distinctive patterns
such controls are likely to wipe out the illegal trade in such common and inexpe
evidence obtained by agents of the Food and Drug Administration links large quan
in the pills with notorious underworld figures.

TEACHER INFORMATION (continued)

ment of new drugs also obviously greatly complicates the problems of legal control.
y adjusted penalties can only grow out of a continuing dialogue on drugs among the
ative branches, law enforcement agencies and medical societies. Too often the judges
llers as if they were users, and demonstrate inadequate knowledge of the intricacies of
metimes even the most venal criminals who were not addicted themselves but made enormous
usiness have been given surprisingly light sentences. If the supply of dangerous drugs
penalties meted out to the smugglers, distributors and pushers, especially of opiates
gens, must be very severe. Furthermore, it seems some form of carefully controlled
permitted for cases of illicit importation, sale, manufacture or distribution of
uding heroin, potent hallucinogens and central stimulants of the intravenous variety.
no reason for our society not to be able to come to grips with the question of how to
criminal elements and at the same time protect the individual from excessive inter-
vacy.

ing its part? On the whole, police work aimed at the non-using pusher - the pusher who
for the high profit - is efficient and productive. But getting a pusher into court is
jail. To have a case against a pusher, the police must have evidence; but the laws
ce may be seized are a basic constitutional protection, framed with great care. In
S. Supreme Court has broadened its interpretation of these laws with such zeal that at
emed all but impossible to frustrated law enforcement officers. "It's not always new
eral Narcotics Bureau official observed recently, "often we'd just settle for a realistic
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ations. They are also allowed to carry firearms for the first time.

d individuals

ave instituted controls to prevent their pills from turning up on the illegal market.
h, for example, sell pills only to selected wholesalers; they use unmarked overpacks
to prevent identification of the contents during shipment and thus reduce stealing;
made in their Mexican laboratories with distinctive patterns. But few believe that any
kely to wipe out the illegal trade in such common and inexpensive drugs. In fact, new
agents of the Food and Drug Administration links large quantity wholesale transactions
torious underworld figures.

TEACHER INFORMATION (continued)

Groups such as the American Medical Association and Kiwanis Internationa abuse and are assisting in an education program to alert youth and adult drug use.

The new laws will not solve the drug problem without public cooperation. family supplies of such drugs, obtained on prescription, are kept under young people alike need to become aware that drug abuse is not a minor for kicks, or because "it's the thing to do."

Individuals: What you can do to prevent addiction.

1. Take care of yourself. What you do today will decide what happens t if prescribed by a qualified physician. Don't let anyone persuade y smoking, sniffing, swallowing, or injecting any harmful substance i make your own decisions.
2. Help others to understand that it is foolish, not smart, to experime anyone say, "Pep pills are no more harmful than a cup of coffee." Y do not know the facts.
3. Select your friends carefully and set a high standard for the kind c There are many groups that will help provide acceptable recreationa church, Scouts, 4-H clubs, boy's clubs, and youth centers.
4. Take a responsible stand; support law enforcement - it is for your p
5. Accept personal responsibility for wiping out addiction, starting i problem of drug addiction concerns you, even though indirectly. A h members. Responsibility comes from careful thinking and weighing o sions about what you want from life, then act accordingly. Act as y way you think others should live.

This is the responsibility of youth in building a modern world that wil freedom. You cannot be forced to obey a law - only punished for not ob individual knows what is harmful and dangerous, and then of his own fr

This can be a goal of youth - a world where great individual responsibi little need for laws to restrict individual freedom. To put it another becomes unnecessary when behavior follows intelligent decisions that ar

TEACHER INFORMATION (continued)

e American Medical Association and Kiwanis International, have taken a stand against drug
isting in an education program to alert youth and adults to the dangers of indiscriminate

not solve the drug problem without public cooperation. Parents need to be certain that
f such drugs, obtained on prescription, are kept under strict surveillance. Adults and
e need to become aware that drug abuse is not a minor matter to be casually entered into
ause "it's the thing to do."

t you can do to prevent addiction.

yourself. What you do today will decide what happens to you in the future. Take drugs only
by a qualified physician. Don't let anyone persuade you to experiment for a "thrill" by
fing, swallowing, or injecting any harmful substance into your body. Do your own thinking:
decisions.
o understand that it is foolish, not smart, to experiment with drugs. Speak up if you hear
Pep pills are no more harmful than a cup of coffee." You will be surprised how many people
he facts.
friends carefully and set a high standard for the kind of recreation in which you participate
y groups that will help provide acceptable recreational and social activities - the Y, your
s, 4-H clubs, boy's clubs, and youth centers.
sible stand; support law enforcement - it is for your protection.
al responsibility for wiping out addiction, starting in your own school or community. The
ug addiction concerns you, even though indirectly. A healthy community needs responsible
sponsibility comes from careful thinking and weighing of values. You must come to conclu-
what you want from life, then act accordingly. Act as you think YOU should live and also the
others should live.

nsibility of youth in building a modern world that will allow a greater degree of individual
nnot be forced to obey a law - only punished for not obeying. In the ideal world the informed
what is harmful and dangerous, and then of his own free will he protects himself and others.

al of youth - a world where great individual responsibility exists. Then there will be
laws to restrict individual freedom. To put it another way, coercion by law enforcement
ary when behavior follows intelligent decisions that are based on reliable information.

VI. Proposed Legislation

A. Montana Revisions

The Montana Legislative Assembly in 1969 passed the House Bill No. 453 pr
sion and sale of dangerous drugs in the state of Montana: Defining danger
stimulant, hallucinogenic and narcotic drugs and defining certain words a
defining who may lawfully sell and possess dangerous drugs, providing for
ous drugs or the alteration of labels, providing for the enforcement of u
for the State Board of Pharmacy to regulate, license and supervise, and d
proper notice and hearing, amending Section 95-302, R.C.M., 1947, 27-724,
inclusive, 94-35-123, 94-35-148, 94-35-199, R.C.M. 1947.

B. Other states

One Federal Narcotics Bureau official said about our laws controlling nar
we need but often just a realistic administration of the laws we have."

The results of stricter penalties against pushers can be seen in Ohio. I
in Ohio's big cities was almost as high as New York's. Then the state im
sentence for a first offense of selling drugs, and the courts backed the
of the law's intent. The number of important violations plummeted 80% in
were scared out of business, or at least into setting up shop in more len
sharp that the Federal Narcotics Bureau reduced its agents in Ohio from 2
and many other states did not stop with severe penalties for selling drug
mere users with unfairly harsh sentences ranging from two years to life,

Assuming that 50,000 addicts live in New York City (estimates range from
and each spends about $20 a day for drugs (a very conservative figure), t
hands illegally in New York City every day - not counting money paid for
across the country. Considering that New York City's political machinery
mildly clogged by corruption, it is possible to believe that some of this
finds its way in bribes to city officials. Some government officials in
such must be the case, although they concede that both the local and fed
untainted. One official, who perhaps knows more about the existence of c
admitted: "Unquestionably there is (corruption) among politicians. But c
that narcotics are mixed into the total package gangsters pay them for.
or loan sharking. If they knew narcotics were involved, they would not t

TEACHER INFORMATION (continued)

ative Assembly in 1969 passed the House Bill No. 453 provided for regulation of the posses-
angerous drugs in the state of Montana: Defining dangerous drugs to include depressant,
nogenic and narcotic drugs and defining certain words and phrases in connection therewith,
awfully sell and possess dangerous drugs, providing for the fraudulent obtaining of danger-
lteration of labels, providing for the enforcement of unlawful sale and possession, providing
d of Pharmacy to regulate, license and supervise, and designate other dangerous drugs after
hearing, amending Section 95-302, R.C.M., 1947, 27-724, 27-725, 54-101 through 54-128
23, 94-35-148, 94-35-199, R.C.M. 1947.

ics Bureau official said about our laws controlling narcotics, "It's not always new laws
just a realistic administration of the laws we have."

icter penalties against pushers can be seen in Ohio. In 1955 the percentage of drug addicts
es was almost as high as New York's. Then the state imposed a mandatory 2 to 40 year
st offense of selling drugs, and the courts backed the prosecutors with strict interpretation
t. The number of important violations plummeted 80% in eight years. Evidently the pushers
business, or at least into setting up shop in more lenient states. The decline was so
eral Narcotics Bureau reduced its agents in Ohio from 20 to three. Unfortunately, Ohio
ates did not stop with severe penalties for selling drugs. They also passed laws punishing
fairly harsh sentences ranging from two years to life, often with no chance of parole.

00 addicts live in New York City (estimates range from a low of 23,000 to a high of 100,000)
out $20 a day for drugs (a very conservative figure), then $1 million in drug money changes
New York City every day - not counting money paid for drugs eventually shipped westward
. Considering that New York City's political machinery periodically shows itself to be
corruption, it is possible to believe that some of this $1 million a day in untaxed cash
ribes to city officials. Some government officials in New York and Washington argue that
ase, although they concede that both the local and federal narcotics police are completely
fficial, who perhaps knows more about the existence of corruption than most other sources,
tionably there is (corruption) among politicians. But often the politicians don't know
mixed into the total package gangsters pay them for. They may think it's only bookmaking
If they knew narcotics were involved, they would not touch it."

C. Federal Situation

The Bureau of Narcotics and Dangerous Drugs was established to more effectivel
of narcotics and dangerous drugs through law enforcement, education, training
out its mission, the new Bureau cooperates with state and local governments, u
industry and other organizations.

Besides enforcing the laws, the Bureau also regulates the legal trade in narc
establishing import, export, and manufacturing quotas for these controlled dr
program is to make citizens aware of the hazards of narcotics and dangerous d
providing literature, speakers, films, and displays. Their training program
Federal, State, local and foreign law enforcement officers with specialized t
dangerous drug control. Their research consists of sponsoring controlled res
abuse. They also have a Scientific Advisory Committee on Drugs for opinions
certain new drugs should be brought under control.

One of the major problems in controlling drug abuse is the controlling of the
War II, when war conditions made smuggling difficult, drug addiction in the U
low. The major center of drug distribution being New York, we also find a ma
New York City. To attack the supply of a city or nation, we must attack thei
used as an example.

More than 80% of the heroin reaching New York City comes from opium grown leg
peasants are allowed to grow it as long as they sell all of it to the governm
to legal pharmaceutical factories. A Turkish farmer must tell the governmen
for opium production, and must estimate the amount of opium he expects his la
Turkish police guess that half of their country's 200,000 opium farmers manag
estimate their crops and sell the few extra pounds to black marketeers - for
what the government pays. If the farmer is caught, the penalty is usually no

Our Federal people feel that the Turkish peasant producers and the wholesaler
often dealt with too leniently when they are apprehended, such as minor priso
months. But our own State Department argues that encouraging producing count
not its job. They claim they are not the proper agency to push controls.

The problem is now in the hands of the United Nations. The U.N. remedy "lies
of control." But the U.N. has no means of enforcing control. It admits that
traffic is "appallingly high."

TEACHER INFORMATION (continued)

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anizations.

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a Scientific Advisory Committee on Drugs for opinions regarding whether or not
ld be brought under control.

ems in controlling drug abuse is the controlling of the drug supply. During World
tions made smuggling difficult, drug addiction in the U.S. dropped to an all-time
of drug distribution being New York, we also find a major use of illegal drugs in
ack the supply of a city or nation, we must attack their sources. Heroin shall be

eroin reaching New York City comes from opium grown legally in Turkey. Turkish
o grow it as long as they sell all of it to the government, which then sells it
al factories. A Turkish farmer must tell the government how much land he is using
and must estimate the amount of opium he expects his land to yield. But the
hat half of their country's 200,000 opium farmers manage quite easily to under-
and sell the few extra pounds to black marketeers - for about $32 a pound, or double
ays. If the farmer is caught, the penalty is usually no more than a fine.

el that the Turkish peasant producers and the wholesalers who buy from them are
leniently when they are apprehended, such as minor prison sentences of up to six
State Department argues that encouraging producing countries to stop the flow is
aim they are not the proper agency to push controls.

the hands of the United Nations. The U.N. remedy "lies in strengthening the system
U.N. has no means of enforcing control. It admits that the worldwide illicit opium
ly high."

What does the U.N. think can reduce the drug traffic? It replies a loud, "Pub

All right. Opium production is not sufficiently controlled. Heroin pushers o
of the courts. Legalizing drugs won't help matters. Then what is being done
of these shortcomings and impossibilities - the addicts themselves?

In New York City, home of half the nation's heroin users, an addict arrested o
usually elect to swap a trial and possible jail sentence for treatment in a ho
mitted only a misdemeanor and takes advantage of this option, he spends about
hospital, followed by nine months of regular visits with a social worker or ps
care center. If the charge against him is a felony, the total length of treat
may extend to three years. If the addict does not respond to treatment - if h
the center or repeatedly goes back on drugs - he may be returned to the court
charge.

Most drug users when arrested never take advantage of this opportunity for tre
want to. An addict brought into court on a misdemeanor charge - possessing dr
reasons, "Why serve three months in a hospital and then endure nine more month
during follow-up care when I can get a six-month sentence - maybe less - on th
four (two months off for good behavior) and come out totally free to take all
"Also," he reasons, knowing that the option cannot be invoked repeatedly, "why
on a mere misdemeanor? I'd better wait till I get hit with a felony and need
avoid a really long jail term"

If an addict in court elects to go to jail briefly rather than to a hospital,
better off than if he remained on the street. In jail the addict is not stea
perhaps $1,000 a week, the value of property that must be stolen and fenced t
day habit. The addict himself also may be better off. He is at least eating,
strength and - perhaps to his emotional advantage - rediscovering what it take
tions without the aid of drugs. And he is not introducing young non-users to

Most authorities agree that, if the drug addict is to be successfully treated,
forced on him.

The problem of addiction abounds with unmet needs. The public, the governmen
with shamefully few exceptions - have not begun to grasp the broad realities
tackle them. Ill-informed observers have obscured the truth, while authoriti
officials experienced in treatment and control - have remained silent or unhe

TEADHER INFORMATION (continued)

ink can reduce the drug traffic? It replies a loud, "Public opinion."

luction is not sufficiently controlled. Heroin pushers operate under the umbrella
izing drugs won't help matters. Then what is being done to cope with the victims
and impossibilities - the addicts themselves?

e of half the nation's heroin users, an addict arrested on almost any charge can
a trial and possible jail sentence for treatment in a hospital. If he has com-
anor and takes advantage of this option, he spends about three months in a
nine months of regular visits with a social worker or psychiatrist at an after-
charge against him is a felony, the total length of treatment and follow-up care
ears. If the addict does not respond to treatment - if he fails to show up at
dly goes back on drugs - he may be returned to the court for trial on the original

arrested never take advantage of this opportunity for treatment. Most do not
rought into court on a misdemeanor charge - possessing drugs, petty larceny -
hree months in a hospital and then endure nine more months of staying off drugs
when I can get a six-month sentence - maybe less - on the charge, serve only
for good behavior) and come out totally free to take all the drugs I want?"
nowing that the option cannot be invoked repeatedly, "why waste this privilege
? I'd better wait till I get hit with a felony and need the treatment option to
ail term"

elects to go to jail briefly rather than to a hospital, society is, of course,
remained on the street. In jail the addict is not stealing, a saving to society of
, the value of property that must be stolen and fenced to support a $20 - $30 a
t himself also may be better off. He is at least eating, exercising, regaining
s to his emotional advantage - rediscovering what it takes to face social situa-
of drugs. And he is not introducing young non-users to drugs.

e that, if the drug addict is to be successfully treated, long-term care must be

ion abounds with unmet needs. The public, the government and the medical profession -
xceptions - have not begun to grasp the broad realities of drug addiction - let alone
ormed observers have obscured the truth, while authorities in the know - doctors and
in treatment and control - have remained silent or unheard.

TEACHER INFORMATION (continued)

What strong, specific steps could be taken to control addiction? Our State Department the buck to the United Nations, could pressure Turkey to police its peasant farmers cl them to stop diverting opium to black marketeers. In New York, the principal port of victim city, the courts could stop bending over backward to protect the legal rights o and act on the realization that the addict needs protection too - that only stiff jail drug dealers to abandon their lucrative crime. Legislators could face up to the need force addicts to undergo treatment. The government could set up adequate after-care f addicts stay off drugs when they emerge from jails or hospitals. Research into addict social and organic aspects - could be increased and accelerated. And doctors could ac bility to treat the addict, instead of using the law as an excuse to ignore him.

D. Other countries

There are several "drug problems" in Britain. The use of large quantities of tranquil sleeping pills, and the use of pills of all kinds, raises problems. Another problem i pills by teenagers, ignorant of their effects, another is the spread of addiction to w drugs" - heroin and cocaine. But they also remind us that their two most commonly mi socially acceptable, and we do not always think of them as the "drug problem" at all. and alcohol. The physical and mental effects of tobacco and alcohol are long and very well as Britain have forgotten how harmful dependence on these two socially acceptable by looking at the proportion of these misused drugs we can better understand the need drugs from being abused.

The five groups of drugs abused in Britain are basically the same five we are concerne types, barbiturates and sedatives, cannabis, marijuana or hashish, hallucinatory, and heroin, cocaine and morphine.

The "British System" (see also narcotics of Teacher Materials) where the addict report discuss his problem. If the physician accepts the patient, he is obligated to attempt this, he is expected to attempt to convince his patient to enter an institution for dr after these measures fail, and following review of the case by other experts, may the maintenance doses - nonprogressive amounts, usually small. The physician is expected within limits of what is medically necessary.

TEACHER INFORMATION (continued)

ould be taken to control addiction? Our State Department, without passing
s, could pressure Turkey to police its peasant farmers closely and force
to black marketeers. In New York, the principal port of entry and principal
stop bending over backward to protect the legal rights of drug traffickers,
at the addict needs protection too - that only stiff jail sentences will force
lucrative crime. Legislators could face up to the need for new laws that will
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hey emerge from jails or hospitals. Research into addiction - into both its
could be increased and accelerated. And doctors could accept their responsi-
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of these misused drugs we can better understand the need to prevent further

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tives, cannabis, marijuana or hashish, hallucinatory, and hard drugs such as
.

o narcotics of Teacher Materials) where the addict reports to a physician to
physician accepts the patient, he is obligated to attempt a cure. Failing
mpt to convince his patient to enter an institution for drug withdrawal. Only
d following review of the case by other experts, may the physician prescribe
essive amounts, usually small. The physician is expected to keep drug supplies
ically necessary.

This system was designed primarily to reduce the crime rate related to dru found to do that nor has it maintained or decreased their number of drug a is true, the crime rate has shown no change for the better but drug addicti shown a marked increase.

The British in or about 1966 began a study of our more strict handling of experts feel they will be going to a more firm approach to the handling of

Sweden: The abuse of cannabis is growing progressively and there are begi LSD users. Their opiate problem has grown but is not serious. The centra of Preludin, amphetamines and Ritalin - is approaching the crisis stage, f to suppress the illicit traffic and the indiscriminate prescribing. Many has by no means been reached. They note that the abuse of central stimula delinquent groups to involve beatniks, bohemians, the unstable, and even s disorders. If this is true, then what is now regarded as a serious and gr a national catastrophe.

E. Legalization of Marijuana

Recently a noted sociologist and proponent of legalizing marijuana stated, indicate that alcohol constitutes a far greater social danger than does ma old argument that "I have just as much right to my poison as you do to you respect however, that there are in this country five or six million physic who have reached that condition because of their aberrant use of or reacti reason to believe that marijuana has the same potential to produce an equa socially disturbed people. Noting this and in the light of the tremendous of alcohol to the people of this nation, one can only marvel at the seemin on the part of marijuana proponents.

Tests show that simple motor acts are performed normally under the influe ones are clearly impaired. Skilled motor acts are performed more rapidly, marijuana distorts time and space perception. Obviously then, those drivi influence of marijuana are potentially dangerous to themselves and to othe reports, there are no statistical data linking marijuana to automobile acc people die each year in this country because of automobile accidents cause of alcohol. The question is whether we want to add to the millions of peo

TEACHER INFORMATION (continued)

signed primarily to reduce the crime rate related to drug abuse but it has not been
or has it maintained or decreased their number of drug addicts. Rather the opposite
rate has shown no change for the better but drug addiction has, in the same period,
rease.

about 1966 began a study of our more strict handling of the drug problem and some
will be going to a more firm approach to the handling of the drug abuse problem.

of cannabis is growing progressively and there are beginning to be small numbers of
opiate problem has grown but is not serious. The central-stimulant problem - the use
tamines and Ritalin - is approaching the crisis stage, fostered by inadequate attempts
licit traffic and the indiscriminate prescribing. Many observers feel that the peak
en reached. They note that the abuse of central stimulants is spreading outside
to involve beatniks, bohemians, the unstable, and even students with personality
s is true, then what is now regarded as a serious and growing problem may soon become
ophe.

rijuana

ociologist and proponent of legalizing marijuana stated, "All empirical investigations
hol constitutes a far greater social danger than does marijuana." Again this is the
"I have just as much right to my poison as you do to yours." One should note in this
hat there are in this country five or six million physically and mentally sick persons
hat condition because of their aberrant use of or reaction to alcohol. There is every
that marijuana has the same potential to produce an equal if not greater number of
people. Noting this and in the light of the tremendous costs of the permissive use
people of this nation, one can only marvel at the seeming lack of social responsibility
ijuana proponents.

imple motor acts are performed normally under the influence of marijuana, but that complex
mpaired. Skilled motor acts are performed more rapidly, but less accurately; furthermore,
time and space perception. Obviously then, those driving an automobile under the
juana are potentially dangerous to themselves and to others. Thus far, despite anecodotal
no statistical data linking marijuana to automobile accidents. Of course, thousands of
ar in this country because of automobile accidents caused by persons under the influence
question is whether we want to add to the millions of people who now drink and drive,

additional millions who would smoke marijuana and then drive while intoxica already have enough problems with accidents caused by one intoxicant withou ways of determining the extent to which an individual is intoxicated and th of punishment to the driver who drives while intoxicated. We do not have a of intoxication due to marijuana on an individual, there about the only tes has been smoking marijuana, but if he says "No," there is no way to prove h such conditions, the thought of legalizing the drug and inflicting marijuan public seems abhorrent.

Reports of recent rioting in western Nigeria went on for three months. The quell the rioting and terrorists, using guns and locally manufactured flame spraying victims with burning petrol. They killed 567 people. The governm was to minimize the problem and deny that any significant number of people political aloofness, the army, much to the joy of the people, moved in and

One of the first acts of the Military Government was to issue a decree mak grow marijuana, and by up to twenty years of prison for merely the possess excessive, but must be considered as a reaction to the misdeed of the gang

VII. Research

A. THC

In 1967 an Israeli chemist, Rafael Mechoulam selected a variety of chemica ingly pieced together a synthetic form of marijuana, the creation of pot i produced by two American companies to supply the nation's research needs. now produces THC in a pure white powder, soluble in water and easy to hand

With THC of constant strength, scientists can make toxicity tests on anima really is. Researchers can give measured doses to volunteers and see how tagging THC with a radioactive isotope such as carbon 14 that beeps a sign body, investigators can pinpoint the organs marijuana affects and how. Sc on whether smoking pot permanently alters the chemistry of the brain. The National Institute of Mental Health.

TEACHER INFORMATION (continued)

ho would smoke marijuana and then drive while intoxicated from this drug. Don't we roblems with accidents caused by one intoxicant without adding another? We now have he extent to which an individual is intoxicated and thus we can mete out some degree driver who drives while intoxicated. We do not have any test to determine the degree o marijuana on an individual, there about the only test you have is to ask him if he juana, but if he says "No," there is no way to prove he is under the influence. Under thought of legalizing the drug and inflicting marijuana-intoxicated drivers on the t.

ting in western Nigeria went on for three months. The army and police were unable to terrorists, using guns and locally manufactured flame-throwers, indiscriminately burning petrol. They killed 567 people. The government's reaction to this chaos roblem and deny that any significant number of people was killed. Faced with this the army, much to the joy of the people, moved in and took over.

s of the Military Government was to issue a decree making it punishable by death to by up to twenty years of prison for merely the possession of it. This seems extremely be considered as a reaction to the misdeed of the gangs of "party stalwarts."

hemist, Rafael Mechoulam selected a variety of chemicals from the shelf and painstak- r a synthetic form of marijuana, the creation of pot in a test tube. THC is now ican companies to supply the nation's research needs. The now refined research process a pure white powder, soluble in water and easy to handle.

strength, scientists can make toxicity tests on animals and learn how harmful pot ers can give measured doses to volunteers and see how it disturbs body and mind. By adioactive isotope such as carbon 14 that beeps a signal as it courses through the can pinpoint the organs marijuana affects and how. Scientists can settle the debate ot permanently alters the chemistry of the brain. These studies are funded by the f Mental Health.

TEACHER INFORMATION (continued)

Although synthesis of tetrahydrocannabinol is now easy to perform, the substance h instability, deteriorating on exposure to air at room temperature. This accounts availability on the illicit market now. However, it is likely the problem of inst be solved. The effects of the synthetic material will be far different from thos smoking one or even several marijuana cigarettes. The mental effects of cannibis related. If one uses small amounts, psychosis, depression, panic or mental deteri unlikely, whereas if the dose is large enough, virtually every user develops a psy

B. Marijuana

Marijuana contains a variety of tetrahydrocannabinols which are unstable. The ins ingredients has retarded research. But since its recent isolation, preliminary re dosages of marijuana has shown that marijuana affects some more than others, indic alcoholics should have made abundantly clear - that certain people are peculiarly drugs.

A recent Medical Letter on Drugs and Therapeutics prepared by a distinguished grou physicians summarizing marijuana's distinctive physical effects: "The drug sometim hypotension (a lowering of normal blood pressure). Excessive dilating of pupils, photophilia (affinity for light) are frequent. Muscular uncoordination, spasms, u dryness of mouth, nausea, vomiting and diarrhea sometimes occur. Increase in appe has been attributed to decreased sugar in the blood. Lowered temperatures have be workers have noted a Raynaud-like syndrome (cold extremities and white fingertips) marijuana depress respiration."

The National Institute of Mental Health is responsible for supporting and conducti more about marijuana and to present this knowledge to the public.

The program of the NIMH Center for Studies of Narcotic and Drug Abuse includes sur the drug, how widely students and others use it, and what physical and psychologic amounts and periods of use have upon people. With NIMH support, scientists are n drug qualities of marijuana and its physical effects.

The NIMH Addiction Research Center in Lexington, Kentucky, is developing studies t marijuana affects memory, perception, mood, and physical movement. Other studies more about the drug's long-range effects on the body and mind.

TEACHER INFORMATION (continued)

ydrocannabinol is now easy to perform, the substance has exhibited marked
n exposure to air at room temperature. This accounts for its non-
market now. However, it is likely the problem of instability will soon
he synthetic material will be far different from those resulting from
marijuana cigarettes. The mental effects of cannibis are largely dose-
amounts, psychosis, depression, panic or mental deterioration is relatively
e is large enough, virtually every user develops a psychotic reaction.

of tetrahydrocannabinols which are unstable. The instability of the active
earch. But since its recent isolation, preliminary research with controlled
wn that marijuana affects some more than others, indicating - as six million
abundantly clear - that certain people are peculiarly vulnerable to certain

rugs and Therapeutics prepared by a distinguished group of practicing
uana's distinctive physical effects: "The drug sometimes causes postural
ormal blood pressure). Excessive dilating of pupils, bloodshot eyes and
ght) are frequent. Muscular uncoordination, spasms, urinary frequency,
miting and diarrhea sometimes occur. Increase in appetite is common and
ased sugar in the blood. Lowered temperatures have been observed and some
-like syndrome (cold extremities and white fingertips). Large amounts of
n."

ntal Health is responsible for supporting and conducting research to learn
present this knowledge to the public.

er for Studies of Narcotic and Drug Abuse includes surveys of how people get
s and others use it, and what physical and psychological effects different
ave upon people. With NIMH support, scientists are now studying the special
and its physical effects.

Center in Lexington, Kentucky, is developing studies to discover exactly how
erception, mood, and physical movement. Other studies are planned to learn
ange effects on the body and mind.

C. LSD

A powerful man-made chemical, D-lysergic acid diethylamide, generally called
1938 from one of the ergot alkaloids. Ergot is a fungus that grows as a rust
LSD is so powerful that a single ounce is enough to provide 300,000 average d
approved use for research, the drug is illegal in the United States.

Some users believe that LSD can heighten their senses, and help to make them
of paintings, writings, and other works produced by drug users have failed to
many cases, works performed by people after they used LSD appeared to be noti

Recent reports from hospitals in areas where LSD is used without close medica
definite dangers. They include: (1) Panic. Because he cannot stop the drug
get panicky and fear that he is losing his mind. (2) Paranoia. He may becom
feeling that someone is trying to harm him or control his thinking. (3) Recu
even months after the individual has stopped using LSD, the things he saw and
may recur and make him fear he is going insane. (4) Accidental death. Becau
that he can fly or float in the air, he may try to leap out of a high window
fall to his death. Or he may drive or walk in front of a moving car because
harmed.

Medical experts point out that the overwhelming worries and fears that can ac
are sometimes disturbing enough to cause acute and even long-lasting mental i

A number of investigators are studying the effects of LSD on chromosomes. Se
reported that the drug causes chromosomal damage or changes when it is added
white blood cells. Others report that the chromosomes of individuals who pre
show unusual breaks. They warn that this may possibly cause abnormalities in
users. Some researchers have reported fetal damage when LSD was given to pre
others have described human birth defects in newborns whose mothers said they

No conclusive or direct link has yet been found between LSD and chromosomal b
found that such breaks cause birth defects. Some changes in the cells are te
But the preliminary evidence is arousing the concern of scientists. Until fu
more light on the question, medical authorities warn that the drug must be co
risk, and women of child-bearing age are particularly advised not to use the

TEACHER INFORMATION (continued)

-lysergic acid diethylamide, generally called LSD, was first developed in
loids. Ergot is a fungus that grows as a rust on rye and other cereals.
e ounce is enough to provide 300,000 average doses. Except for government-
drug is illegal in the United States.

heighten their senses, and help to make them more creative. But studies
er works produced by drug users have failed to support this viewpoint. In
people after they used LSD appeared to be noticeably poorer than before.

n areas where LSD is used without close medical supervision warn of
: (1) Panic. Because he cannot stop the drug's action, the user may
losing his mind. (2) Paranoia. He may become increasingly suspicious,
to harm him or control his thinking. (3) Recurrence. Days, weeks, or
l has stopped using LSD, the things he saw and felt while on the drugs
is going insane. (4) Accidental death. Because the LSD user may feel
air, he may try to leap out of a high window or from other heights and
rive or walk in front of a moving car because he thinks he cannot be

the overwhelming worries and fears that can accompany the LSD experience
to cause acute and even long-lasting mental illness.

tudying the effects of LSD on chromosomes. Several scientists have
hromosomal damage or changes when it is added to a tissue culture of
rt that the chromosomes of individuals who presumably have taken LSD
that this may possibly cause abnormalities in the offspring of LSD
reported fetal damage when LSD was given to pregnant rats and mice and
th defects in newborns whose mothers said they took LSD.

s yet been found between LSD and chromosomal breaks, nor has it been
rth defects. Some changes in the cells are temporary and not permanent.
arousing the concern of scientists. Until further research throws
lical authorities warn that the drug must be considered a definite
g age are particularly advised not to use the drug.

The drug has been tested widely as a possible treatment for mental and e
alcoholism. In studies so far, it has failed to help the severely ill.
neurotics and alcoholics have made some improvement, according to invest
but follow-up studies indicate that these improvements are not always la

The National Institute of Mental Health is the primary federal agency re
seeing research on LSD. It possesses the only legal supply of the drug
Center for Studies of Narcotic and Drug Abuse is currently supporting 58
surveys of the extent of the use of LSD by students and by the general p
psychological, and genetic effects in animals and in humans; basic studi
and to chart its course through the body; and long-range projects to stu

Investigators are about to complete a series of studies to determine the
for alcoholism and emotional problems, and as a way to provide some ment
illnesses. They are also searching for new ways to treat people who su

VIII. How successful is rehabilitation?

Until recently, the public has regarded addicts as incurable. Once "hooked,
idea arose from the fact that so many opiate addicts relapsed to drug use, e
hospitalization. Not long ago, treatment for addiction consisted of little
and detoxification. When more ambitious programs were attempted, they had o
"cured" addicts, but each contributed to knowledge about the addict, the dru
rehabilitation.

Today, there is general agreement that a successful treatment program should
detoxification in a hospital environment, but also psychiatric evaluation an
supervision and counseling upon the addict's return to the community.

Initial detoxification of addicted persons is best accomplished only under m
setting. There, the patient's drug intake can be limited to physician-pres
drugs administered for purposes of gradual, controlled withdrawal. In addit
conducted to discern any underlying mental and emotional disorders, so that
treatment can be arranged, if necessary.

TEACHER INFORMATION (continued)

widely as a possible treatment for mental and emotional illnesses, and for
so far, it has failed to help the severely ill. But under controlled conditions,
have made some improvement, according to investigators. The work is not complete,
dicate that these improvements are not always lasting.

f Mental Health is the primary federal agency responsible for supporting and over-
It possesses the only legal supply of the drug in the United States. The NIMH
rcotic and Drug Abuse is currently supporting 58 research projects which include
the use of LSD by students and by the general population; LSD biological,
ic effects in animals and in humans; basic studies to explain the drug's action
through the body; and long-range projects to study LSD users and their culture.

to complete a series of studies to determine the value of the drug as a treatment
onal problems, and as a way to provide some mental relief for persons with terminal
o searching for new ways to treat people who suffer from the drug's bad side effects.

tion?

as regarded addicts as incurable. Once "hooked," there was no road back. This
t so many opiate addicts relapsed to drug use, even after long periods of
go, treatment for addiction consisted of little more than withdrawal from the drug
re ambitious programs were attempted, they had only limited success in terms of
ntributed to knowledge about the addict, the drugs he uses and ways to effect his

ement that a successful treatment program should include, not only controlled
environment, but also psychiatric evaluation and therapy, and continued medical
pon the addict's return to the community.

dicted persons is best accomplished only under medical supervision in a hospital
's drug intake can be limited to physician-prescribed medications, including
ses of gradual, controlled withdrawal. In addition, examinations can be
erlying mental and emotional disorders, so that psychiatric consultation and
f necessary.

After detoxification, and after he has demonstrated the ability to cope with stress
environment, the former addict can be returned to the community. This is the most c
rehabilitation. He is still not emotionally equipped to face many situations and pr
without special help. For example, neither the neighborhood in which he was introdu
taking friends have changed during his absence. Accordingly, the pressures to use d
To help him resist these pressures, trained personnel working with community organi
to provide guidance and support during times of crisis. Initially, he might be requ
with a case worker, keep psychiatric or other medical appointments, and attend group
degree and duration of such supervision would depend on the rate of rehabilitation.
might elapse before a former addict could be discharged from medical supervision as

Aside from helping "ex-addicts" rehabilitate themselves, community health organizati
for initial contact between the active drug abuser and those who can help him. Addi
a desire to "get off drugs" particularly when their supply of drugs or money is runn
be short-lived, but at such times, addicts may present themselves at clinics and re
may be poorly motivated when they step in the door, properly trained counselors can
enter treatment programs.

Such programs must be flexible and subject to modification in accordance with the n
abuser. For example, a "spree user" who has developed neither physical dependence
will rarely, if ever, require hospitalization. He may, however, need psychiatric e
whether he has any underlying emotional or mental disorders requiring medical atten
counseling services will be indicated. The "hard-core" drug abuser on the other ha
complete abstinence from drugs unless he commits himself to the complete program.
commitment may not prevent relapses. Return to drug use is not uncommon, even afte
periods.

As is true of alcohol abuse, it is generally recognized that relapse, in itself, is
failure or incurability. The ingrained habits and response patterns of years aren'
or months. The way back to a useful independent place in society is long and hard
knowledge about drug addiction and its causes accumulates, the chances for rehabili

Drug Abuse Centers:

Under legislation passed in 1929, the Public Health Service was authorized to estab
Federal prisoners who were narcotic drug addicts could be treated. It was also aut
patients if beds were available. The result was the establishment in the mid-1930'
Service hospitals at Lexington, Kentucky, and Fort Worth, Texas.

TEACHER INFORMATION (continued)

s demonstrated the ability to cope with stress situations in a protected
returned to the community. This is the most critical period in the abuser's
ionally equipped to face many situations and problems of the outside world
either the neighborhood in which he was introduced to drugs nor his drug-
s absence. Accordingly, the pressures to use drugs again will be enormous.
rained personnel working with community organizations should be assigned
g times of crisis. Initially, he might be required to maintain contact
or other medical appointments, and attend group therapy sessions. The
ion would depend on the rate of rehabilitation. Conceivably, several years
could be discharged from medical supervision as "cured".

ilitate themselves, community health organizations can provide an opportunity
e drug abuser and those who can help him. Addicts frequently experience
arly when their supply of drugs or money is running low. This desire may
ddicts may present themselves at clinics and request help. Although addicts
ep in the door, properly trained counselors can sometimes persuade them to

ubject to modification in accordance with the needs of the individual
who has developed neither physical dependence nor psychological dependence
alization. He may, however, need psychiatric evaluation to determine
nal or mental disorders requiring medical attention. In some cases, only
d. The "hard-core" drug abuser on the other hand, will seldom achieve
s he commits himself to the complete program. But even this degree of
Return to drug use is not uncommon, even after relatively long "clean"

enerally recognized that relapse, in itself, is not a sign of complete
ned habits and response patterns of years aren't changed in a few weeks
independent place in society is long and hard for the addict. But as
ts causes accumulates, the chances for rehabilitation will be increased.

e Public Health Service was authorized to establish hospitals where
drug addicts could be treated. It was also authorized to accept voluntary
e result was the establishment in the mid-1930's of the Public Health
ucky, and Fort Worth, Texas.

The hospital at Lexington, which receives male addict patients from east of th
addict patients from the entire country, has accommodations for about 1,000 pa
Worth has 800 beds, half of which are used for male patients from west of the

During the first years, virtually all the patients were addicts who had been c
and sent to the hospitals by the Federal Bureau of Prisons. Now, however, a g
have entered voluntarily (about 50% of the total).

Generally there is a short waiting period, but the hospitals try to take first
Application for admission can be made by a letter to the medical officer in ch
institution. Voluntary patients who can afford to pay are charged $9.50 a day

Despite extensive efforts in the institutional phase of treatment, the gains m
could not be maintained following discharge because of the almost total absenc
continued treatment in the community. MORE THAN 90 PERCENT OF THEM BECAME REA
6 MONTHS.

Lexington believes that if a person is to completely recover from physical add
of life - in which drugs are NOT used, either to produce pleasure or banish di
a drug-free environment for 4 months after receiving his last narcotic drugs.
voluntary patients, however, leave within 2 weeks - as soon as they have gone
or shortly afterward. By the end of the first month, more than half have gone
as long as the doctors would like. All the others are discharged AMA - agains

Many States and communities see the need for rehabilitation programs and are i
there are numerous privately endowed rehabilitation centers throughout the cou
and treatment may be secured on a voluntary basis. These include private hosp
service organizations, and religious groups.

A residential treatment center for drug addicts has been established at the Ne
Institute at Princeton as part of a program recommended by the Narcotic Drug S
Legislature. On June 15, 1965, a 40-bed ward for men and 12-bed ward for wome

The treatment plan of the New Jersey Drug Addiction Program depends on afterca
home community after the completion of his stay in the hospital.

TEACHER INFORMATION (continued)

exington, which receives male addict patients from east of the Mississippi River and female rom the entire country, has accommodations for about 1,000 patients. The hospital at Fort s, half of which are used for male patients from west of the Mississippi.

years, virtually all the patients were addicts who had been convicted of some Federal offense ospitals by the Federal Bureau of Prisons. Now, however, a great many are individuals who ntarily (about 50% of the total).

s a short waiting period, but the hospitals try to take first-time patients at once. dmission can be made by a letter to the medical officer in charge of the appropriate untary patients who can afford to pay are charged $9.50 a day.

efforts in the institutional phase of treatment, the gains made by patients frequently tained following discharge because of the almost total absence of aftercare services and nt in the community. MORE THAN 90 PERCENT OF THEM BECAME READDICTED - GENERALLY WITHIN

es that if a person is to completely recover from physical addiction and start a new pattern h drugs are NOT used, either to produce pleasure or banish distress - he ought to stay in conment for 4 months after receiving his last narcotic drugs. More than one-third of the s, however, leave within 2 weeks - as soon as they have gone through the withdrawal period, ard. By the end of the first month, more than half have gone. Less than one-third stay octors would like. All the others are discharged AMA - against medical advice.

communities see the need for rehabilitation programs and are instituting them. In addition, s privately endowed rehabilitation centers throughout the country, where detoxification be secured on a voluntary basis. These include private hospitals, "halfway houses," tions, and religious groups.

eatment center for drug addicts has been established at the New Jersey Neuro-Psychiatric nceton as part of a program recommended by the Narcotic Drug Study Commission of the State June 15, 1965, a 40-bed ward for men and 12-bed ward for women began accepting patients.

an of the New Jersey Drug Addiction Program depends on aftercare of the patient in his own fter the completion of his stay in the hospital.

The Synanon Foundation is a non-profit organization founded by a former addict and d addicts through informal group therapy. It conducts its program through communal li of and administered by former addicts. Self-improvement is emphasized through educa training. It requires a considerable investment of money and a long period of resid first established in California, but others have been developed in other parts of th east coast.

Narcotics Anonymous: Members of this self-help organization, patterned after Alcoho common problems associated with drug abuse and attempts at abstinence.. Chapters ar of large cities with headquarters in New York City. It provides a program for rehab and offers group therapy to assist former users to abstain from use of drugs.

Based on a religious theme, Teen Challenge originated from the work of Reverend Davi addicts in New York City. Houses have been established in many sections of the coun of heavy narcotics use. It has been successful in the rehabilitation of young addic individual personality development techniques.

Halfway House: This is a program of rehabilitation and research planned to provide supporting home after his release from the hospital. Residential centers are locate to which addicts return. They provide counseling, vocational training and medical a

Operation "We Care," New Jersey: A community action program designed to help the ha find ways in which they can help themselves. Operates on the theory that unemployme addiction, etc., the Center provides information and referral service, individual a educational and vocational guidance services and a recreation program.

Encounter: Operated mostly by former drug users, the program attempts to rehabilita the drug menace.

The "English System " Although most experts in the field of drug abuse advocate meth rehabilitation such as are described above, there are some who support another appro would make drugs available to addicts legally, with certain restrictions. This is k because it has been used in that country for some years. The primary aims of this p related to illegal drug traffic by eliminating the need for an illegal source of dru crimes caused by the need of addicts to seek large sums of money for illicit drugs. be a way to bring the addict back to a state of normal health.

TEACHER INFORMATION (continued)

ofit organization founded by a former addict and devoted to the cure of
rapy. It conducts its program through communal living centers composed
cts. Self-improvement is emphasized through education and cultural
ble investment of money and a long period of residence. Chapters were
ut others have been developed in other parts of the country including the

his self-help organization, patterned after Alcoholics Anonymous, discuss
ug abuse and attempts at abstinence.. Chapters are located in a number
in New York City. It provides a program for rehabilitation of former addicts
former users to abstain from use of drugs.

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of rehabilitation and research planned to provide the ex-addict with a
from the hospital. Residential centers are located within the communities
vide counseling, vocational training and medical assistance.

A community action program designed to help the hard-core unemployed person
themselves. Operates on the theory that unemployment breeds crime, drug
des information and referral service, individual and group study services,
ce services and a recreation program.

rmer drug users, the program attempts to rehabilitate youngsters caught in

st experts in the field of drug abuse advocate methods of treatment and
bed above, there are some who support another approach to the problem. They
icts legally, with certain restrictions. This is known as the "English System"
country for some years. The primary aims of this program are to reduce crime
y eliminating the need for an illegal source of drugs and to eliminate the
cts to seek large sums of money for illicit drugs. It does not pretend to
to a state of normal health.

Making drugs available in this way has not been effective in decreasing crime in Engla
the method has been accompanied by a rise in the number of addicts in that country. T
the system will soon be discontinued. The weakness of such a system is that while it
drugs easier, it does nothing to decrease the pressure on certain individuals to use t
method has not produced its desired effect of decreasing drug-related crime.

Methadone Maintenance Program: Widespread interest in methadone has been created rece
program in which stabilization on methadone has been tried as a deterrant to heroin ab
given orally in solution once a day to selected patients and the dose increased gradua
until there appears to be no immediate effect of the daily dose and no craving for oth
these circumstances the patient appears to be in a calm, relaxed state, freed of his a
direct his attention to finding and holding a job or to other normal activities. Havi
he does not seek heroin but whether or not his inclination to use other drugs is compl
yet clear. It must be remembered that the patients in this program have not been free
Methadone produces drug dependence of morphine type and the patients are dependent on
have made satisfactory adjustments, have ceased their antisocial activities and appear
rehabilitation. The outcome, if and when methadone is withdrawn, cannot be predicted
work needs to be done before there is wider application of the procedure especially by
Two conditions are vital: The drug must never be dispensed or prescribed for self-adm
daily dose must be taken in the presence of the physician. The daily dose must be adj
particular patient and his development of tolerance and his drug intake must be consta
urinalysis.

IX. What does the future hold?

A MATURING OUT: In a study of the figures of the Federal Bureau of Narcotics, of pers
narcotics for a period of five years, they have found the average age at which they be
and their average length of addiction was 8.6 years. By the age of 47, 87.3% of the
narcotic users had become inactive.

These figures suggest that there are fewer and fewer drug addicts who cease drug use
life and, contrariwise, that there is a considerable concentration of persons ceasing
of prime adulthood. This phenomenon was identified as maturing out of narcotic addict
that, as the stresses of adolescence became less insistent and the drug user felt less
to respond to such stresses, he tended to stop taking narcotics.

TEACHER INFORMATION (continued)

his way has not been effective in decreasing crime in England. Moreover, use of anied by a rise in the number of addicts in that country. There is evidenc that scontinued. The weakness of such a system is that while it makes procurement of ing to decrease the pressure on certain individuals to use them. Moreover, the s desired effect of decreasing drug-related crime.

ram: Widespread interest in methadone has been created recently by the experimental tion on methadone has been tried as a deterrant to heroin abuse. The drug has been nce a day to selected patients and the dose increased gradually as tolerance develops no immediate effect of the daily dose and no craving for other narcotics. Under tient appears to be in a calm, relaxed state, freed of his anxieties and able to nding and holding a job or to other normal activities. Having his craving satisfied t whether or not his inclination to use other drugs is completely in abeyance is not embered that the patients in this program have not been freed of their drug dependence. pendence of morphine type and the patients are dependent on methadone. Some of them ustments, have ceased their antisocial activities and appear to be on the way to me, if and when methadone is withdrawn, cannot be predicted at this time. Much more re there is wider application of the procedure especially by the private physician. The drug must never be dispensed or prescribed for self-administration but the n the presence of the physician. The daily dose must be adjusted to the need of the development of tolerance and his drug intake must be constantly monitored by

y of the figures of the Federal Bureau of Narcotics, of persons that had not used five years, they have found the average age at which they became inactive was 35.1 f addiction was 8.6 years. By the age of 47, 87.3% of the total number of former inactive.

there are fewer and fewer drug addicts who ceease drug use in the later years of at there is a considerable concentration of persons ceasing drug use in the years phenomenon was identified as maturing out of narcotic addiction. It was speculated dolescence became less insistent and the drug user felt less threatened by the need s, he tended to stop taking narcotics.

TEACHER INFORMATION (continued)

359 addicts released from the United States Public Health Service Hospital at ver 30 had a significantly higher abstinence rate from the hospital, 61% ent.

mes from psychopaths. The dropout curve for psychopaths is almost identical d ceased taking drugs after five years. Students of psychopathy have noted ear" by their early thirties. There is reason to believe that they "disappear" f their psychopathy.

ted with juvenile delinquents, a large proportion of whom seem to begin ate" society and "going straight" when they reach the age of about 30.

e of narcotics they found sufficient material to suggest that the younger a longer is his period of drug use likely to last. In a study of the u of Narcotics, the proportion of persons using narcotics for over 15 se starting on narcotics in their early teens and mid-thirties. Their age use narcotics ranged from age 7 to age 71, with the majority in their late summarize it to say, "The length of a narcotic user's addiction will be h of a year less, for each year that the onset of his addiction is delayed.

it is not possible to control the effects of dangerous drugs to the point behavior or perception of the user we would have no need for restrictive or tely, society has never been able to protect the individual or his neighbors lack of interest in, or capability of, limiting his intake of drugs once nd thus avoid the point where intoxication makes him a menace. As a result, ot always effective methods of control. We pass restrictive and punitive laws ance between the individual's rights and his responsibilities. Where drug rotect the majority from drug abuse and its effects by a minority, particularly violence, death, and the acting out of antisocial impulses.

s, do we or don't we want individuals smoking cannabis? Can we or can't we and individually to repeat the expensive experiments performed inadvertently story where the drug got out of control? With alcohol firmly entrenched in the all the sorrow it brings, can we afford to legalize another habit that has at otential of causing national harm?

TEACHER INFORMATION (continued)

Perhaps the most important function of education regarding marijuana is to de-glamo out that the kick is small and that marijuana's lure for many people is sociologica

It is also important to stress that the marijuana problem cannot be considered by i in the context of more potent and potentially more toxic forms of cannabis as well a drugs such as amphetamines.

The time in history has come to make the decision as to what we want to do with can be well to remember that, while drugs can offer us escape through illusion and give there is only one way of life that can give us happiness: facing, living in and cop without a pharmacological crutch. If we come to the point where we cannot do this, abuse will be the victor.

In addition to the strong possibility that central stimulants will be our next majo likely that many drug users will experiment with virtually any agent with intoxicat there was little overlap between groups using LSD, heroin, and amphetamines. Now so with marijuana try not only LSD and stimulants, but also heroin. Part of the tenden drugs is related to ebullient reports about new agents promulgated by the drug cult; always accompanied by assurances of the new agent's safety.

TEACHER INFORMATION (continued)

rtant function of education regarding marijuana is to de-glamorize the drug by pointing small and that marijuana's lure for many people is sociological - not pharmacological.

to stress that the marijuana problem cannot be considered by itself but must be evaluated e potent and potentially more toxic forms of cannabis as well as other pleasure-giving mines.

as come to make the decision as to what we want to do with cannabis. As we do, it might hat, while drugs can offer us escape through illusion and give up pleasure through euphoria, of life that can give us happiness: facing, living in and coping with reality on our own ical crutch. If we come to the point where we cannot do this, the battle is done and drug tor.

rong possibility that central stimulants will be our next major drug problem, it seems users will experiment with virtually any agent with intoxication potential. In the past lap between groups using LSD, heroin, and amphetamines. Now some individuals who start t only LSD and stimulants, but also heroin. Part of the tendency to experiment with many bullient reports about new agents promulgated by the drug cult; such statements are almost assurances of the new agent's safety.

TEACHER INFORMATION (continued)

SOME QUESTIONS AND ANSWERS ON DRUG ABUSE

1. Q. What is drug usage?

   A. There are many definitions but the most useful one seems to be use of a drug or
   which is not medically or socially acceptable.

2. Q. Why does drug usage seem to be such a big problem today?

   A. More people are abusing drugs, particularly young people. In addition, the num
   to abuse has increased.

3. Q. Is drug abuse the same as drug addiction?

   A. No.

4. Q. What is drug addiction?

   A. Addiction is a disease resulting from continued abuse of drugs. It involves th
   physical dependence and an overwhelming desire to continue using drugs sometime

5. Q. What is tolerance?

   A. Our bodies are capable of adapting to the presence of many drugs so that higher
   to produce the effects originally produced by small doses. This phenomenon is

6. Q. What is physical dependence?

   A. Certain drugs, when taken for prolonged periods of time, cause strange and larg
   body. When this happens, if use of the drug is stopped symptoms called an abst
   symptoms occur. The person is then said to be physically dependent on the drug
   prevent these symptoms.

7. Q. What is withdrawal like?

   A. The severity of withdrawal depends on the drugs involved, how long they have be
   Narcotic withdrawal has been portrayed on the stage and screen on many occasion
   over-dramatized. Actually, withdrawal from barbiturates is more dangerous beca

TEACHER INFORMATION (continued)

SOME QUESTIONS AND ANSWERS ON DRUG ABUSE

s but the most useful one seems to be use of a drug or other substance in a manner socially acceptable.

tc be such a big problem today?

rugs, particularly young people. In addition, the number of drugs which are subject

drug addiction?

esulting from continued abuse of drugs. It involves the development of tolerance, an overwhelming desire to continue using drugs sometimes called psychological dependence.

adapting to the presence of many drugs so that higher and higher doses are required riginally produced by small doses. This phenomenon is called tolerance.

nce?

n for prolonged periods of time, cause strange and largely unknown changes in the , if use of the drug is stopped symptoms called an abstinence syndrome or withdrawal son is then said to be physically dependent on the drug since he requires it to

al depends on the drugs involved, how long they have been abused and the doses used. been portrayed on the stage and screen on many occasions. It is usually somewhat ly, withdrawal from barbiturates is more dangerous because fatal convulsions may occur.

8. Q. What does habituating or habit-forming mean?

A. Habituating or habit-forming were terms applied to drugs which caused psycholo
but not physical dependence. Because habituating and addicting were frequentl
incorrectly to describe all drugs of abuse, use of these terms has been abando
term drug dependence.

9. Q. Are all of the drugs that we hear so much about lately dependence producing?

A. All of the drugs of abuse around today produce some degree of psychological de
barbiturates, alcohol and certain minor tranquilizers produce both psychologic

10. Q. What are the dependence producing drugs around today?

A. A brief list of the dependence producing drugs around today would have to inc
narcotics, marijuana, cocaine, the barbiturates, certain tranquilizers, amphet
and alcohol.

11. Q. Is drug abuse and drug dependence a serious problem in the United States?

A. No one really knows the extent of the problem. We do know new kinds of drugs
abused, more young people are abusing drugs and that the problem is no longer
to certain cultural groups.

12. Q. What kind of person is a potential addict?

A. The personality of the potential addict has never been defined, although he us
problems prior to establishment of drug dependence. Predicting susceptibilit
almost impossible. Drugs are abused for many reasons, and commonly abused dr
effects making predictions even more difficult.

13. Q. Can drug dependence be cured?

A. The best answer is a qualified yes. Cures are achieved but the relapse rate
what you call a cure. If total abstinence is a goal, cure rate will be very
in society is defined as a cure, then results will be much better. What is r
complete overhaul in the person's attitudes towards life.

TEACHER INFORMATION (continued)

r habit-forming mean?

rming were terms applied to drugs which caused psychological dependence and tolerance, lence. Because habituating and addicting were frequently used interchangeably and all drugs of abuse, use of these terms has been abandoned in favor of the general

hat we hear so much about lately dependence producing?

use around today produce some degree of psychological dependence, but only the opiates, and certain minor tranquilizers produce both psychological and physical dependence.

e producing drugs around today?

pendence producing drugs around today would have to include the opiates and other cocaine, the barbiturates, certain tranquilizers, amphetamine and other stimulants,

dependence a serious problem in the United States?

e extent of the problem. We do know new kinds of drugs and other substances are being ple are abusing drugs and that the problem is no longer confined to the slum areas or oups.

a potential addict?

potential addict has never been defined, although he usually has had personality blishment of drug dependence. Predicting susceptibility to drug dependence is rugs are abused for many reasons, and commonly abused drugs produce many different tions even more difficult.

cured?

qualified yes. Cures are achieved but the relapse rate is high. It depends too, on If total abstinence is a goal, cure rate will be very very low. If ability to function as a cure, then results will be much better. What is required for cure is usually the person's attitudes towards life.

14. Q. What are the sources of illicit drugs?

A. Opium, heroin, cocaine and the better grades of marijuana must be smuggled i
effective in fantastically small doses, is usually made in clandestine labor
purpose. Amphetamine and barbiturate drugs are sometimes diverted from legi
but a considerable portion of the illicit supplies of these drugs is provide
operators who set up manufacturing facilities wherever it is convenient to o
manufacture amphetamine and barbiturate products for the illicit trade, in o

15. Q. Why are drugs abused?

A. It has been said that any drug capable of altering man's mood is capable of
for fun, they are abused to cloud awareness, to make the world look rosy. T
dull and drab and want to be exciting and interesting. They are abused by a
down and relax. Drugs are abused by people who think they can expand their
creativity. They are abused by people who want to be anything but what they
anywhere but in the situation they are in.

16. Q. Is alcoholism a form of drug dependency?

A. Yes, between four and six million Americans are physically or psychologicall

17. Q. Does everyone who abuses drugs become dependent on them?

A. No. Many people occasionally abuse drugs and never become dependent on them
potential problem because it is from their ranks that most of the drug depen
The occasional user must be carefully differentiated from the drug dependent
become a way of life.

18. Q. What factors have contributed to the drug abuse problem in the U.S.A.?

A. There are many factors. Drug abuse is a problem of the young and there are
Permissive attitudes in child raising may be a factor. We live in a drug o
would include the presence of devoted and articulate disciples of use of the
expand consciousness and enhance creativity. "Tune in, turn on, drop out."
sion of rebellion. It is a cool way to really bug your folks. In a society
gratification, drugs look to some like a way to instant happiness. Many o

TEACHER INFORMATION (continued)

f illicit drugs?

and the better grades of marijuana must be smuggled into the U.S.A. LSD, which is
ally small doses, is usually made in clandestine laboratories set up for this specific
and barbiturate drugs are sometimes diverted from legitimate distribution channels,
tion of the illicit supplies of these drugs is provided by opportunistic, fly-by-night
anufacturing facilities wherever it is convenient to operate. Their sole desire is to
e and barbiturate products for the illicit trade, in order to make a quick dollar.

any drug capable of altering man's mood is capable of being abused. Drugs are abused
ed to cloud awareness, to make the world look rosy. They are abused by people who feel
to be exciting and interesting. They are abused by agitated people who want to slow
are abused by people who think they can expand their consciousness or enhance their
abused by people who want to be anything but what they seem themselves to be, or be
tuation they are in.

of drug dependency?

six million Americans are physically or psychologically dependent on alcohol.

ses drugs become dependent on them?

sionally abuse drugs and never become dependent on them. However, these people are a
ause it is from their ranks that most of the drug dependent individuals will be drawn.
ust be carefully differentiated from the drug dependent individual for whom drugs have

tributed to the drug abuse problem in the U.S.A.?

s. Drug abuse is a problem of the young and there are more young people around today.
in child raising may be a factor. We live in a drug oriented society. Other reasons
sence of devoted and articulate disciples of use of the drugs who think that they can
and enhance creativity. "Tune in, turn on, drop out." Drugs can be used as an expres-
t is a cool way to really bug your folks. In a society less and less willing to defer
look to some like a way to instant happiness. Many other reasons could be listed.

19. Q. Which drugs and substances subject to abuse are medically useful?

A. The narcotics, barbiturates, amphetamine and its derivatives, and the mi
nificant medical utility. LSD has been carefully studied but no clear in
apparent. Marijuana was formerly thought to have medical uses, but it is
The solvents, except for ether, chloroform and alcohol, are not considere

20. Q. What are the harmful effects of drug abuse?

A. Abuse of drugs can have mental, physical, legal, and social effects on th
effects are immediate, some are more subtle in onset. The effects are be
specific drug being abused.

21. Q. What effects of narcotics cause them to be abused?

A. Narcotics reduce sensitivity to pain and other stimuli and produce a sens
tension and anxiety and produce a feeling of indifference.

22. Q. What are the medical uses of narcotics?

A. The primary use for narcotics is to relieve severe pain. Until very rece
narcotics like morphine to treat pain wer available. One new drug is ava
addicting, and which is useful in severe pain. Only time will tell if th
morphine for use in pain.

23. Q. What are the effects of abuse of narcotics?

A. Abuse of narcotics results in the development of tolerance and both physi
Because of tolerance, addicts use higher and higher doses, until in some
Use of unsterile equipment is also a danger when narcotics are abused int

24. Q. Is marijuana really a narcotic?

A. Marijuana is not a narcotic in the medical sense. It is a hallucinogen,
irregular stimulant. Cocaine is not a narcotic either, it is a stimulant
are treated as narcotics under national and international law.

TEACHER INFORMATION (continued)

ect to abuse are medically useful?

phetamine and its derivatives, and the minor tranquilizers all have sig-
has been carefully studied but no clear indication for its medical use is
ly thought to have medical uses, but it is no longer used in Western medicine.
chloroform and alcohol, are not considered medically useful.

drug abuse?

physical, legal, and social effects on the individual. Some of these harmful
more subtle in onset. The effects are best considered together with the

them to be abused?

pain and other stimuli and produce a sense of euphoria. They dull fear,
a feeling of indifference.

rcotics?

s to relieve severe pain. Until very recently no adequate substitutes for
t pain wer available. One new drug is available which is thought to be non-
in severe pain. Only time will tell if this drug, pentzocaine, will replace

of narcotics?

the development of tolerance and both physical and psychological dependence.
use higher and higher doses, until in some cases, lethal doses are reached.
also a danger when narcotics are abused intravenously.

?

the medical sense. It is a hallucinogen, and is sometimes classified as an
is not a narcotic either, it is a stimulant. However, both marijuana and cocaine
national and international law.

25. Q. What effects of marijuana cause it to be abused?

A. Use of marijuana is associated with a feeling of euphoria, exaltation and a
by a free flow of ideas. Sense of time, distance, vision and hearing are dis
occur. It loosens inhibitions and increases suggestibility.

26. Q. Why is marijuana legally classed as a narcotic?

A. The answer is historical. Legal attempts to control drugs go back many years
for control of abuse substances arose around 1900 and stemmed from concern ab
and marijuana. Each was thought to be medically useful but because of abuse
to control distribution and sale of these substances. These controls eventu
national laws and international treaties which put these substances in a sin
provided for strict control over their production and distribution. Our nar
both the social attitudes towards drug abuse and drug abusers, and the way s
handled at the time these laws were drafted.

27. Q. What are the harmful effects of use of marijuana?

A. Marijuana use produces a characteristic intoxication (see Q.23), and behavio
produce physical dependence but a strong psychological dependence may develo
hallucinations and chronic use has been associated with development of psych
individual more susceptible in asocial and anti-social behavior situations,
contact with drug abusing groups and sub-cultures, and may facilitate use of

28. Q. What effects of LSD cause it to be abused?

A. LSD and other hallucinogens distort perception and produce dream images and
changes in thought, mood, and activity. Colors intensify or change shape, s
These and other effects have led users to claim expansion of consciousness o
using LSD.

29. Q. Is LSD addicting?

A. No, it does not appear to produce either physical or psychological dependenc

TEACHER INFORMATION (continued)

ıana cause it to be abused?

ssociated with a feeling of euphoria, exaltation and a dreamy sensation accompanied
as. Sense of time, distance, vision and hearing are distorted. Hallucinations may
hibitions and increases suggestibility.

lly classed as a narcotic?

cal. Legal attempts to control drugs go back many years. Our modern legal structure
substances arose around 1900 and stemmed from concern about abuse of cocaine, the opiates
was thought to be medically useful but because of abuse potential it was deemed necessary
on and sale of these substances. These controls eventually took the form of a number of
ernational treaties which put these substances in a single category called narcotics and
ontrol over their production and distribution. Our narcotic and marijuana laws reflect
udes towards drug abuse and drug abusers, and the way society felt the problem should be
hese laws were drafted.

effects of use of marijuana?

s a characteristic intoxication (see Q.23), and behavior may be erratic. It does not
ndence but a strong psychological dependence may develop. Large doses may produce
ronic use has been associated with development of psychosis. Marijuana use makes the
ptible in asocial and anti-social behavior situations, brings the user into closer
sing groups and sub-cultures, and may facilitate use of other more dangerous drugs.

ause it to be abused?

nogens distort perception and produce dream images and hallucinations. They cause
mood, and activity. Colors intensify or change shape, spatial relations are distorted.
cts have led users to claim expansion of consciousness or enhancement of creativity after

ar to produce either physical or psychological dependence.

30. Q. What then are the harmful effects of LSD?

A. Under the influence of LSD, many people become very anxious, frightened, ev
is not predictable. Some individuals may actually become psychotic. Suici
deaths have been reported. The psychosis may last for a few days or severa
more frightening, may recur without again using the drug. Chromosomal dama
LSD users.

31. Q. Is LSD medically useful?

A. Certain preliminary studies suggest that LSD may be useful in treatment of
sexual disorders. No medical use has been firmly established after almost

32. Q. What effects of barbiturates cause them to be abused?

A. Barbiturates are depressants, and barbiturate intoxication closely resembl

33. Q. Are barbiturates addicting?

A. For many years barbiturates were not considered addicting. Recent studies
psychological dependence can follow prolonged use of high dosages of barbi

34. Q. What is withdrawal from barbiturates like?

A. During withdrawal symptoms may include nervousness, anxiety, tremor, insom
blood pressure when the patient stands. Of greater concern is that convul
fatal if untreated.

35. Q. What are the medical uses of barbiturates?

A. Barbiturates are used to treat epilepsy, high blood pressure, insomnia, an
of emotional disorders.

36. Q. Are tranquilizers addicting?

A. Certain minor tranquilizers are capable of producing both physical and psy
major tranquilizers used in the treatment of more serious emotional disord
of any kind.

TEACHER INFORMATION (continued)

harmful effects of LSD?

e of LSD, many people become very anxious, frightened, even terrified. This "bad trip" . Some individuals may actually become psychotic. Suicides and several "accidental" eported. The psychosis may last for a few days or several months, and what is even may recur without again using the drug. Chromosomal damage has also been reported in

seful?

y studies suggest that LSD may be useful in treatment of alcoholism and certain psycho- No medical use has been firmly established after almost twenty years of testing.

rbiturates cause them to be abused?

epressants, and barbiturate intoxication closely resembles alcohol intoxication.

ddicting?

rbiturates were not considered addicting. Recent studies show that both physical and ndence can follow prolonged use of high dosages of barbiturates.

from barbiturates like?

symptoms may include nervousness, anxiety, tremor, insomnia, nausea and sudden drops in en the patient stands. Of greater concern is that convulsions may occur which can be d.

cal uses of barbiturates?

used to treat epilepsy, high blood pressure, insomnia, and in the treatment and diagnosis rders.

addicting?

nquilizers are capable of producing both physical and psychological dependence. The rs used in the treatment of more serious emotional disorders do not produce dependence

37. Q. What are the medical uses for minor tranquilizers?

A. They are used for treatment of less severe emotional disorders, chiefly tension an
also used for muscle relaxants.

38. Q. What effects of amphetamine and other stimulants cause them to be abused?

A. These drugs increase alertness, dispel depression and mask fatigue. They help you
normal limits.

39. Q. Is amphetamine addicting?

A. Amphetamine is not generally considered an addicting drug. It does not produce ph
although a high degree of psychological dependence may develop.

40. Q. What are the medical uses of amphetamine drugs?

A. Amphetamine and its derivatives are used in obesity, in mild depression, in hypera
counteract the drowsiness produced by sedatives, and in narcolepsy, a disease char
attacks of sleepiness.

41. Q. What are the effects of abuse of amphetamine derivatives?

A. The most serious medical effects of abuse of amphetamine result from the masking o
may go to the point of collapse. In addition, individuals intoxicated with an amp
exhibit highly irrational behavior. Tolerance does develop and abusers may take l
from overdosage are very rare. In certain individuals amphetamine abuse results i
acute psychosis. The most dangerous form of amphetamine abuse is "speed" which i
intravenously.

42. Q. What effects of solvents and glue cause them to be abused?

A. These substances when inhaled cause an intoxication which resembles alcohol intoxi
include hallucinations.

TEACHER INFORMATION (continued)

for minor tranquilizers?

t of less severe emotional disorders, chiefly tension and anxiety. Many are
ants.

e and other stimulants cause them to be abused?

ness, dispel depression and mask fatigue. They help you to keep going beyond

lly considered an addicting drug. It does not produce physical depence
psychological dependence may develop.

of amphetamine drugs?

atives are used in obesity, in mild depression, in hyperactive children, to
produced by sedatives, and in narcolepsy, a disease characterized by sudden

buse of amphetamine derivatives?

effects of abuse of amphetamine result from the masking of fatigue. The abuser
llapse. In addition, individuals intoxicated with an amphetamine drug may
behavior. Tolerance does develop and abusers may take large doses, but deaths
rare. In certain individuals amphetamine abuse results in development of an
t dangerous form of amphetamine abuse is "speed" which is use of methamphetamine

and glue cause them to be abused?

aled cause an intoxication which resembles alcohol intoxication, but may also

43. Q. What are the harmful effects of solvent abuse, or glue sniffing?

A. In addition to the behavioral changes resulting from intoxication and hallucin
to kidney, blood and nervous system may result. Of more immediate danger is t
either from the overwhelming presence of fumes in a closed space or from the p
the solvents or glue up to the face.

44. Q. How is drug distribution controlled by law?

A. Almost all drugs are subject to some restrictions in manufacture, distributio
controls are applied to drugs subject to abuse. Legal controls for abuse drug
those covering narcotics under which are grouped the opiates, synthetic opiate
marijuana, and those controls covering depressants, stimulant and hallucinogen
barbiturates, and other sedatives, amphetamine and other stimulants, and LSD a

45. Q. How are the narcotic drugs and substances controlled by law?

A. The opiates, synthetic opiate derivatives, cocaine and marijuana are subject t
federal laws and international treaties including, chiefly, the Harrison Act c
Act of 1937, and the Single Convention for Narcotic Drugs of 1961. These prov
the growth, production, manufacture, distribution, sale, possession, and expo
The most severe penalties for drug trafficking are contained in these laws, a
the national and international level is expended in controlling the narcotic t
the Federal Bureau of Narcotics has been responsible for control of narcotic c
rigid narcotic laws.

46. Q. How is distribution of non-narcotic drugs subject to abuse controlled by law?

A. A number of state and federal laws control these agents. Chief among these i
Amendments of 1965, a federal law which controls depressants, stimulants and
provides for strict control over the manufacture, distribution and sale of th
must register with the government and keep complete records of their distribu
law also limits refills of prescriptions for these drugs. The Bureau of Drug
BDAC, a division of the Food and Drug Administration has been responsible for

TEACHER INFORMATION (continued)

cts of solvent abuse, or glue sniffing?

ioral changes resulting from intoxication and hallucinations, physical damage
vous system may result. Of more immediate danger is the chance of suffocation
ming presence of fumes in a closed space or from the plastic bag used to hold
o the face.

controlled by law?

ject to some restrictions in manufacture, distribution or sale. Even stricter
drugs subject to abuse. Legal controls for abuse drugs fall into two categories,
under which are grouped the opiates, synthetic opiate derivatives, cocaine and
trols covering depressants, stimulant and hallucinogenic drugs which includes the
sedatives, amphetamine and other stimulants, and LSD and other hallucinogens.

gs and substances controlled by law?

piate derivatives, cocaine and marijuana are subject to control under several
tional treaties including, chiefly, the Harrison Act of 1914, the Marihuana Tax
gle Convention for Narcotic Drugs of 1961. These provide for strict control over
manufacture, distribution, sale, possession, and export and import of these agents.
s for drug trafficking are contained in these laws, and considerable effort on both
tional level is expended in controlling the narcotic traffic. In the United States
rcotics has been responsible for control of narcotic drugs. Most states also have

non-narcotic drugs subject to abuse controlled by law?

ederal laws control these agents. Chief among these is the Drug Abuse Control
ederal law which controls depressants, stimulants and hallucinogens. This law
trol over the manufacture, distribution and sale of these drugs. Manufacturers
government and keep complete records of their distribution of these drugs. The
of prescriptions for these drugs. The Bureau of Drug Abuse Control, known as
Food and Drug Administration has been responsible for administering this law.

47. Q. How effective is law enforcement in curbing drug abuse?

A. Good law enforcement has been and will continue to be very important in control of Effective control of the illicit traffic in drugs helps remove a primary cause of availability of drugs in abuse situations. The very existence of legal penalties from abusing drugs. Law enforcement is not the only answer to drug abuse problems vital component of the total answer.

48. Q. Does drug abuse cause crime?

A. Drug abuse and dependency is expensive. Thrill seekers and dependent persons will lengths to obtain drugs. Many are unable to support their dependence or themselve than crime. Because of this it can be said that drug abuse produces criminal beha there is considerable evidence to show that in many individuals anti-social and cr preceded abuse of drugs. In the rare instances where drug abuse is associated wi the individual involved usually has significant psychopathic problems which contri situation than drug abuse.

49. Q. What are the legal and social aspects of drug abuse?

A. Drug abuse can result in arrest, trial and imprisonment in those cases where posse illegal. The social aspects are more subtle. In general, society disapproves of certain peer groups may not. Society is slowly accepting the fact that sickness i dependency but has made itself clear that it is not anxious to accept "potheads," freaks" or narcotic addicts in our social structure. Even with alcohol, abuse of of social acceptance, society still disapproves of public intoxication and alcohol

50. Q. What should I do if I suspect that a member of my family or a friend is abusing dr

A. Consult your family physician at once. Only he can decide what treatment should b abuse is involved, hospitalization may not be required. Don't over-react. Rememb of drugs may not be a crime and drug abuse is not a crime. Try to discover the so This will be vital to prevent recurrence of drug abuse and may help prevent others drug abuse situations. Do not try to disregard the problem. If it has gone on t abuse is apparent, it is unlikely to correct itself without outside assistance.

forcement in curbing drug abuse?

s been and will continue to be very important in control of drug abuse.
e illicit traffic in drugs helps remove a primary cause of drug abuse, the
n abuse situations. The very existence of legal penalties will deter many
w enforcement is not the only answer to drug abuse problems, but it is a
total answer.

rime?

cy is expensive. Thrill seekers and dependent persons will often go to great
. Many are unable to support their dependence or themselves by any other way
this it can be said that drug abuse produces criminal behavior. However,
evidence to show that in many individuals anti-social and criminal behavior
. In the rare instances where drug abuse is associated with violent crimes,
i usually has significant psychopathic problems which contribute more to the
se.

social aspects of drug abuse?

in arrest, trial and imprisonment in those cases where possession or sale are
spects are more subtle. In general, society disapproves of drug abuse, although
y not. Society is slowly accepting the fact that sickness is involved in drug
e itself clear that it is not anxious to accept "potheads," "acidheads," "speed
dicts in our social structure. Even with alcohol, abuse of which has a degree
society still disapproves of public intoxication and alcoholism.

suspect that a member of my family or a friend is abusing drugs?

ysician at once. Only he can decide what treatment should be. If only occasional
pitalization may not be required. Don't over-react. Remember, illegal possession
crime and drug abuse is not a crime. Try to discover the source of the drug supply.
prevent recurrence of drug abuse and may help prevent others from being exposed to
Do not try to disregard the problem. If it has gone on to the extent that drug
is unlikely to correct itself without outside assistance.

51. Q. Where can the abuser or drug dependent individual be treated?

A. Most occasional abusers require little medical treatment. Drug dependent per
treatment during withdrawal, and subsequently will need psychiatric evaluatio
must be accomplished in a hospital. Narcotic addicts require special care in
for this purpose.

52. Q. What is the best way for me to prevent my children from abusing drugs?

A. The best way to prevent drug abuse in your family is to educate your childre
They must learn what drugs can do for them if properly used, but must also b
drugs have when abused. This should be done in a matter-of-fact manner. No
just tell it like it is. In addition, the maintenance of a good atmosphere
and discussed in an intelligent straight forward manner will help prevent th
drug abuse may be a symptom. Keeping the communication lines open with your
It will be important for you and them in many problem areas besides drug abus

53. Q. Is there a solution to the drug abuse problem?

A. Perhaps, but there are no simple answers. Education about use and abuse of
enforcement is necessary but other factors are present. We still do not rea
compels people to abuse drugs and become dependent on them. Is it poverty,
deprivation, disenchantment with reality, the generation gap, or what? Many
going to seek solace or escape and drug abuse is one of the possibilities.
large social problems, and encourage and help people to solve their own prob
via drug abuse, if we are really to accomplish something in this field.

54. Q. What can I do about the drug abuse problem?

A. There are several things. First from reliable sources obtain sound, correct
Second, be able to communicate this information without hysteria and without
introduction of information about the use and abuse of drugs into the curric
Check with your pharmacist and physician to see if they can assist the schoo
Cooperate in every way possible with law enforcement agencies responsible fo
in drugs and finally, treat drugs with respect yourself. Do not exchange dr
Do not ask pharmacists or physicians to violate the laws concerning distribu
to abuse.

TEACHER INFORMATION (continued)

or drug dependent individual be treated?

ers require little medical treatment. Drug dependent persons may require active
hdrawal, and subsequently will need psychiatric evaluation and therapy. Withdrawal
in a hospital. Narcotic addicts require special care in treatment centers set up

for me to prevent my children from abusing drugs?

vent drug abuse in your family is to educate your children on the proper use of drugs.
drugs can do for them if properly used, but must also be aware of the harmful effects
sed. This should be done in a matter-of-fact manner. No preaching, no finger wagging,
is. In addition, the maintenance of a good atmosphere where problems can be raised
intelligent straight forward manner will help prevent the generation gap, of which
symptom. Keeping the communication lines open with your children is most important.
for you and them in many problem areas besides drug abuse.

to the drug abuse problem?

are no simple answers. Education about use and abuse of drugs will help, good law
ssary but other factors are present. We still do not really understand what causes or
buse drugs and become dependent on them. Is it poverty, discrimination, emotional
hantment with reality, the generation gap, or what? Many people with problems are
e or escape and drug abuse is one of the possibilities. We will have to solve some
ms, and encourage and help people to solve their own problems, rather than dodge them
we are really to accomplish something in this field.

the drug abuse problem?

things. First from reliable sources obtain sound, correct information about drug abuse.
communicate this information without hysteria and without preaching. Encourage the
formation about the use and abuse of drugs into the curriculum of schools in your areas.
armacist and physician to see if they can assist the schools in this situation.
way possible with law enforcement agencies responsible for curbing the illicit traffic
ly, treat drugs with respect yourself. Do not exchange drugs with friends or relatives.
ists or physicians to violate the laws concerning distribution or sale of drugs subject

TEACHER INFORMATION (continued)

QUESTIONS FOR PRE AND POST TESTS

True-False Questions

1. The term "drug" applies only to substances that are used as medicines. False

2. The medical meaning of the term "narcotic" differs from the legal meaning of the term True

3. Drug dependence is said to exist only when a person is physically and psychologically dependent on a drug. False

4. Psychological dependence on a drug is easier to overcome than physical dependence False

5. When a person has developed tolerance to a drug, he needs increasing amounts of that drug in order to react satisfactorily to its presence True

6. Amphetamine, when self-administered to prevent sleepiness while driving, may cause intoxication which affects the driver's ability to handle his car safely. True

7. Barbiturates, taken in excessive amounts, cause a severe depression of the central nervous system which may result in unconsciousness or death. True

8. When alcohol and barbiturates are taken together, the drugs tend to neutralize each other, causing a relatively mild reaction. False

9. Barbiturates, if taken repeatedly, may cause total drug dependence which is comparable in severity to heroin dependence. True

10. Amphetamine may be self-administered with relative safety because it does not lead to drug dependence False

11. The dangerous drugs differ from the narcotics in that their excessive use leads only to psychological dependence, whereas narcotic abuse leads to both psychological and physical dependence False

12. The young person who abuses dangerous drugs is likely already to have a history of delinquent behavior. False

TEACHER INFORMATION (continued)

13. It has been shown through experimentation that the use of amphetamines can substantially improve athletic performance. False

14. The organic solvents present in glues and plastic cements are capable of damaging the brain, affecting liver and kidney functions, and interfering with the blood-forming function of the bone marrow. True

15. There is no evidence that glue sniffing leads to the development of dependence. False

16. It is believed that the abuse of volatile chemicals will soon be solved through the development of non-intoxicating solvents to replace those now present in glues and plastic cements. Fals

17. Marijuana is an important medicinal drug because of its effectiveness as a pain-killer. Fals

18. Marijuana is a contraband drug, and whoever produces or distributes it is guilty of a crime punishable as a felony. True

19. Most marijuana entering the United States today comes by way of Mexico. True

20. The plant Cannabis sativa, from which marijuana is derived, grows only in warm, humid climates. Fals

21. The plant from which marijuana is derived has been known and used as a drug for several thousand years. True

22. A person who feels he must take marijuana (or any other drug) in order to enjoy life or to belong in a group has failed to make a normal wholesome adjustment to life and has not learned to function as an independent, responsible member of society. True

23. If other people are using marijuana (or some other drug) it is best for you to use it too, so as not to appear different. Fals

24. If you can't find success or enjoyment in life, it is wise to try to forget your sense of failure by drinking alcohol or taking drugs. Fals

TEACHER INFORMATION (continued)

25. Since most marijuana users today do not progress to heroin, there is little reason not to use marijuana. False

26. Marijuana contains a powerful chemical that appears to incite its users to commit acts of violence. False

27. There is now believed to be little or no relation between the use of marijuana and the commission of acts of violence. False

28. A person who forms a habit of marijuana use may find it exceedingly difficult to break that habit. True

29. The use of marijuana opens the way for many persons to the use of other drugs. True

30. When a drug is said to be "non-addicting" it means that a person using the drug can stop any time he wants to. False

31. A person should make decisions in terms of his own standards and convictions rather than in terms of the pressures and practices of other people. True

32. Marijuana, while apparently acting as a stimulant, dulls the higher control centers of the brain so that one's conduct may become socially unacceptable, for one's normal inhibitions no longer prevail. True

33. A person under the influence of marijuana is able to think more clearly and act more efficiently than he would under normal conditions. False

34. When a person has taken marijuana, he is likely to experience a period of stimulation followed by a period of depression. True

35. LSD may be used only for purposes approved by the Federal Food and Drug Administration. True

36. Any licensed physician can obtain LSD from the Food and Drug Administration for the purpose of conducting scientific investigations. False

37. People with stable personalities seldom experience adverse effects after taking LSD. False

TEACHER INFORMATION (continued)

38. Since the early 1940's, scientists have known that LSD causes hallucinations. True

39. LSD is one of the most potent drugs known to man. True

40. LSD has an accepted place in medical practice. False

41. After a user takes LSD, his mind "expands" and he becomes more aware of his surroundings. False

42. Psychological dependence may result from the use of LSD. True

43. A user taking the same amount of LSD in the same surroundings a second time will have an experience similar to the one he had the first time. False

44. Hallucinations experienced after a person has taken LSD can recur several months later, even though he has not taken any more of the drug. True

45. An individual's value system often changes after he has taken LSD True

46. After taking LSD, the user becomes more social; that is he relates more closely to those around him. False

47. A number of persons have committed suicide after taking LSD. True

48. Some people use LSD in order to withdraw from reality. True

49. A person who has used LSD several times can predict the kind of side effects, if any, that a new user might expect. False

50. Persons who use LSD seldom use any other drugs. False

51. In Montana it is illegal to have LSD in one's possession. True

52. LSD is derived from the sacred mushroom, which has long been used by the Indians in Mexico. False

53. LSD is a relatively mild drug which can be used safely in large amounts. False

TEACHER INFORMATION (continued)

54. Once it is brought under medical control, LSD promises to be a "miracle drug" in that it helps people to solve their problems and adjust better to life. False

55. LSD and other hallucinogens are now subject to the same federal controls as the dangerous drugs. True.

56. The use of LSD is frequently accompanied by severe and dangerous side effects. True

57. Physicians prescribe LSD for persons who have symptoms of anxiety and depression. False

58. LSD has a special attraction for adolescents who are searching for identity. True

59. LSD can help adolescents resolve the conflicts of "growing up." False

60. Involvement in narcotic use, if it occurs, is likely to take place only after prior experience with other drugs. True

61. Heroin is legally used in the United States today as a medicinal drug. False

62. The process of injecting heroin (or any other foreign substance) directly into the veins carries serious danger of infection. True

63. Since heroin appears not to damage body tissue, its use is not serious from the standpoint of health. False

64. The use of heroin leads rapidly and almost inevitably to total drug dependence. True

65. The recent increase in sex crimes throughout the United States is attributable, in part, to the increase in narcotic use. False

66. Narcotic dependence may be said to be cured when a person has been relieved of the physical aspects of dependence. False

67. The narcotic addict in Great Britain, once he has registered with designated authorities, is entitled automatically to receive a supply of drugs to maintain his desired level of dependence. False

TEACHER INFORMATION (continued)

68. The "clinic plan" of administering sustaining doses of narcotics to addicts was tried in the United States in the 1920's and deemed a success at the time. False

69. The American Medical Association has come out in favor of the adoption of the British method of narcotics control in the United States. False

70. The United States has made significant progress in international narcotic control. True

71. In the United States the dispensing of drugs by a physician to an addict for the gratification of his desire or need for drugs is now considered by the courts to fall within the province of legitimate medical practice. False

72. Whereas control of drug abuse in the United States rests largely in the hands of law enforcement personnel, control in Great Britain is vested in the medical profession. True

73. Since the drug abuse pattern in the United States differs drastically from that in Great Britain, it is doubtful that this country will ever move toward wholesale adoption of the British method of narcotic control. True

74. Under Montana law the mere possession of marijuana or of a narcotic (other than one prescribed by a physician) is illegal. True

TEACHER INFORMATION (continued)

Multiple-Choice Questions

1. "A substance that produces sleep, lethargy, and relief of pain" is the definition of (a) a drug; (b) a sedative; (c) a narcotic; (d) an opiate; or (e) an analgesic. (c)

2. A substance, other than food, that affects body structure and functions is called (a) a depressant; (b) a narcotic; (c) an analgesic; (d) a drug; or (e) an intoxicant. (d)

3. The term "narcotic" is used medically in reference to (a) marijuana; (b) the barbiturates; (c) the opiates; (d) the hallucinogens; or (e) the hypnotics. (c)

4. "A state arising from repeated administration of a drug on a periodic or continuous basis" is the definition of (a) drug abuse; (b) depression; (c) drug dependence; (d) analgesia; or (e) euphoria. (c)

5. Substances which depress body functions are (a) the barbiturates and amphetamines; (b) barbiturates and opiates; (c) amphetamine and opiates; (d) cocaine and marijuana; or (e) amphetamines and cocaine. (b)

6. Substances which stimulate body functions are (a) barbiturates and amphetamines; (b) barbiturates and opiates; (c) amphetamines and opiates; (d) cocaine and marijuana; or (e) amphetamines and cocaine. (e)

7. "A generalized feeling of well-being in the absence of any objective justification for such feeling" is the definition of (a) euphoria; (b) tolerance; (c) analgesia; (d) dependence; or (e) hallucination. (a)

8. One of the following statements about the dangerous drugs is correct: (a) they are outlawed both legally and medically; (b) they may be used legally without a doctor's prescription; (c) they may be used legally only with a doctor's prescription; (d) they fall under different regulations depending on the drug involved; or (e) they are mild drugs comparable to alcohol in their effects. (c)

9. The most hopeful approach to the solution of the glue sniffing problem at present appears to lie in (a) more stringent laws; (b) more stringent enforcement of existing laws; (c) voluntary control by distributors of glues and plastic cements; (d) replacement of volatile chemicals by non-intoxicating solvents; or (e) education of children concerning the hazards of introducing foreign substances into the body. (e)

10. In the United States marijuana is most frequently taken into the body by (a) chewing; (b) sniffing; (c) eating; (d) drinking; or (e) smoking. (e)

11. The odor associated with the use of marijuana is most like (a) dried alfalfa or hay; (b) alcohol; (c) garlic; (d) decaying fruit; or (e) burning wood. (a)

12. The body system most affected by the use of marijuana is (a) the nervous; (b) the circulatory; (c) the digestive; (d) the respiratory; or (e) the muscular. (a)

13. In laboratory research, LSD has proved to be (a) safe and effective for the treatment of epilepsy; (b) safe but not effective for the treatment of alcoholism; (c) neither safe nor effective for the treatment of any disease; or (d) safe but not effective for the treatment of psychosis. (c)

14. From among the following side effects, the one which has not resulted from the use of LSD is (a) distortion of perception; (b) withdrawal illness; (c) delusions; or (d) severe depression. (b)

15. A person who takes LSD often continues to take it because (a) it improves his ability to concentrate; (b) it causes sexual stimulation; (c) it creates a sensation which he likes; or (d) it brings on a physical craving. (c

16. The part of the opium poppy from which raw opium is derived is (a) dried flowers, (b) dried leaves; (c) unripe seed pods; (d) ripe seeds; or (e) unripe seeds. (c

17. The federal law which forms the basis of our government's control over narcotics by requiring registration and payment of an occupational tax by those who deal in narcotics is (a) the Boggs Act; (b) The Narcotic Control Act: (c) The Harrison Narcotic Act: (d) The Opium Poppy Control Act; or (e) The Narcotic Drugs Import and Export Act. (c

TEACHER INFORMATION (continued)

Bread	1.	Money	(bread)
Drop	2.	A personal problem	(hang-up)
Goof Balls	3.	To take by mouth	(drop)
Hang-up	4.	A drug habit where physical dependence is present	(monkey)
Horse	5.	To abandon a drug habit	(kick)
Kick	6.	The butt of a marijuana cigarette	(roach)
Monkey	7.	Stimulants	(ups)
Roach	8.	A highly potent hallucinogen	(STP)
STP	9.	Heroin	(horse)
Ups	10.	Barbiturates	(goof balls)
Barbs	11.	Intoxicated (drug or alcohol)	(smashed)
Blow a stick	12.	Barbiturates	(barbs)
Hash	13.	A marijuana cigarette	(joint)
Joint	14.	To inject drugs directly into a vein	(mainline)
Mainline	15.	To sniff powdered narcotics into nostrils	(snort)
Man	16.	Hashish, marijuana	(hash)
Meth	17.	The police	(man)
Smashed	18.	Being "high" on hallucinogens	(trip)
Snort	19.	To smoke a marijuana cigarette	(blow a stick)
Trip	20.	Methedrine	(meth)

TEACHER INFORMATION (continued)

Bum trip	21.	Anxious, disturbed	(up tight)
Burned out	22.	Off drugs	(clean)
Clean	23.	A sclerotic condition of the veins resulting from abscesses and continued puncturing	(burned out)
Drop a cap	24.	A cache of narcotics	(stash)
Grass	25.	Under the influence of narcotics	(stoned)
Kilo	26.	A large amount of narcotics	(kilo)
Outfit	27.	The materials and equipment used by an addict to inject a drug intravenously	(outfit)
Stash	28.	Take a dose of LSD	(drop a cap)
Stoned	29.	Marijuana	(grass)
Uptight	30.	An unpleasant experience with LSD	(bum trip)
Bennies	31.	Benzedrine	(bennies)
Blow one's mind	32.	Amphetamines	(truck drivers)
Cold turkey	33.	Informer	(stoolie)
Gun	34.	A hypodermic needle	(gun)
On a trip	35.	Police in neighborhood, a shakedown or search	(rumble)
Pill freak	36.	Sudden drug withdrawal	(cold turkey)
Rumble	37.	To break with present reality	(blow one's mind)
Stoolie	38.	Under the influence of drugs	(turned on)
Truck drivers	39.	Under the influence of LSD or other hallucinogens	(on a trip)
Turned on	40.	Dangerous drug user	(pill freak)

TEACHER INFORMATION (continued)

Dime bag	41. Drug users home	(Pad)
High	42. Dexedrine	(oranges)
Hooked	43. A ten-dollar purchase of narcotics	(dome bag)
Juice-head	44. User of liquor	(juice-head)
Pad	45. Dark shades or glasses	(tea shades)
Pep pills	46. Methedrine, usually injected	(speed)
Oranges	47. A marijuana cigarette	(reefer)
Reefer	48. Addicted	(hooked)
Speed	49. Under the influence of drugs	(high)
Tea shades	50. Stimulants	(pep pills)
Downs	51. Money	(paper)
Flashback	52. To inject drugs	(shoot up)
Hard stuff	53. Directly into the vein	(intravenous)
Intravenous	54. A later repeat trip from the same dose	(flashback)
Junkie	55. Morphine, cocaine or heroin	(hard stuff)
Mary jane	56. Depressants	(downs)
Paper	57. Marijuana	(mary jane)
Pot	58. A narcotic addict	(junkie)
Shoot up	59. In possession of narcotics	(straight)
Straight	60. Marijuana	(pot)

TEACHER INFORMATION (continue

SLANG TERMS

A	Benzedrine, dexedrine and methedrine
A-bomb	Mixture of marijuana and heroin
Abe	Five-dollar bill (also Lincoln, nickel, fin, etc.)
Acapulco gold	Marijuana smuggled across the border from Mexico into the U
Ace	(1) one-year sentence; also bullet; (2) one of anything; (3
Acid	LSD
Acid head	An abuser of LSD
Action	(1) Selling of narcotics; (2) anything pertaining to crimi
Artillery	Equipment for injecting drugs
Backtrack	To withdraw the plunger of a syringe before injecting drug position
Bad seed	Mescaline - peyote
Bad trip	An unpleasant experience with LSD
Bag	A container of drugs
Bagman	A drug supplier
Bale	A pound of marijuana
Ball	A party
Balloon	A small packet of narcotics

TEACHER INFORMATION (continued)

SLANG TERMS

Benzedrine, dexedrine and methedrine

Mixture of marijuana and heroin

Five-dollar bill (also Lincoln, nickel, fin, etc.)

Marijuana smuggled across the border from Mexico into the United States

(1) one-year sentence; also bullet; (2) one of anything; (3) an ace note; one-dollar bill

LSD

An abuser of LSD

(1) Selling of narcotics; (2) anything pertaining to criminal action

Equipment for injecting drugs

To withdraw the plunger of a syringe before injecting drugs to make sure needle is in proper position

Mescaline - peyote

An unpleasant experience with LSD

A container of drugs

A drug supplier

A pound of marijuana

A party

A small packet of narcotics

Bang	To inject drugs
Bamboo	An opium pipe - also gong - gonger, dream stick, hop stick, saxophone, ste
Barbs	Barbiturates
Bathtub	Refers to LSD made in home or improvised places
Battes	Injectable amphetamines
Bean	Capsule - Benzedrine tablet or capsule
Been had	Arrested
Belt	(1) Euphoria following an injection of narcotics; (2) a shot or quantity
Bennies	Benzedrine (brand of amphetamine sulfate, Smith, Kline and French Laborat
Bernice	Cocaine
Big C.	Cocaine
Big John	The police
Bindle	A small quantity or packet of narcotics
Birdle	Small quantity or packet of narcotics
Bird's eye	Extremely small amount of narcotics
Biz	Equipment for injecting drugs
Black & Whites	Patrol car or policemen
Black Russian	Dark colored, very potent hashish

TEACHER INFORMATION (continued)

lrugs

ipe - also gong - gonger, dream stick, hop stick, saxophone, stem, crock, log

es

LSD made in home or improvised places

amphetamines

Benzedrine tablet or capsule

ia following an injection of narcotics; (2) a shot or quantity of drugs to be injected

(brand of amphetamine sulfate, Smith, Kline and French Laboratories) tablets

e

lantity or packet of narcotics

ntity or packet of narcotics

small amount of narcotics

for injecting drugs

r or policemen

red, very potent hashish

Blanks	Poor quality narcotics
Blasted	Under the influence of drugs, to be intoxicated by a drug
Blast a stick or joint	To smoke a marijuana cigarette
Blow a stick	To smoke a marijuana cigarette
Blow one's mind	To break with present reality
Blue devils	Amytal (brand of amobarbital, Eli Lilly and Company) capsules
Blue heavens	Amytal (a barbiturate-amobarbital)
Blue velvet	Paregoric and an antihistamine (a combination of paregoric and intravaneous use)
Bombido	(Bombita) injectable amphetamine
Boo	Marijuana
Boost	To shoplift
Booster stick	(1) cigarette of treated marijuana, reputedly potent; (2) an o of which is dipped in a concentrated essence of marijuana pres blown out, and inhaled.
Boxed	In jail
Boy	Heroin
Bread	Money
Bull	A Federal Narcotic Agent, a police officer
Bum rap	An arrest or conviction for a crime one didn't commit
Bum trip	An unpleasant experience with LSD

TEACHER INFORMATION (continued)

Poor quality narcotics

Under the influence of drugs, to be intoxicated by a drug

To smoke a marijuana cigarette

To smoke a marijuana cigarette

To break with present reality

Amytal (brand of amobarbital, Eli Lilly and Company) capsules

Amytal (a barbiturate-amobarbital)

Paregoric and an antihistamine (a combination of paregoric and antihistamines for intravaneous use)

(Bombita) injectable amphetamine

Marijuana

To shoplift

(1) cigarette of treated marijuana, reputedly potent; (2) an ordinary cigarette, the tip of which is dipped in a concentrated essence of marijuana preserved in alcohol - lit, blown out, and inhaled.

In jail

Heroin

Money

A Federal Narcotic Agent, a police officer

An arrest or conviction for a crime one didn't commit

An unpleasant experience with LSD

Bum steer	False or unreliable information about drugs or peddlers.
Bummer	An unpleasant experience with LSD
Burned	To receive phony or badly diluted drugs
Burned out	A sclerotic condition of the veins resulting from abscesse
Businessman's trip	Amphetamine - short trip
Bust a mainline	To inject drugs intravaneously
Busted	To be arrested
Buttons	Sections of the peyote cactus
Cactus	Peyote
Caballo	Heroin
Can	Approximately an ounce of marijuana
Candy	Barbiturates
Cap	A container of drugs (usually a capsule, usually heroin)
Cartwheels	Amphetamine sulfate (round, white, double-scored tablets)
Cecil	Cocaine
Champ	Drug abuser who won't reveal his supplier - even under pr
Charley	Cocaine
Charas	Form of marijuana in India; hashish
Charge	Marijuana
Charged up	Under the influence of drugs

TEACHER INFORMATION (continued)

or unreliable information about drugs or peddlers. Also bogus trip, bum wire, jive.

pleasant experience with LSD

ceive phony or badly diluted drugs

erotic condition of the veins resulting from abscesses and continued puncturing

tamine - short trip

ject drugs intravaneously

arrested

ons of the peyote cactus

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ximately an ounce of marijuana

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tainer of drugs (usually a capsule, usually heroin)

tamine sulfate (round, white, double-scored tablets)

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abuser who won't reveal his supplier - even under pressure

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of marijuana in India; hashish

juana

r the influence of drugs

TEACHER INFORMATION (continued)

Chipping	Taking small amounts of drugs on an irregular basis
Chippy	An abuser taking small, irregular amounts - also prostitute
Clean	Off drugs
Clear up	To withdraw from drugs
Coasting	Under the influence of drugs
Coasts to coasts	Amphetamines
Cocktail	Marijuana butt attached to a regular cigarette
Coke	Cocaine
Cokie	A cocaine addict
Cold turkey	Sudden drug withdrawal
Come down	End of drug experience
Coming down	Emerging from an LSD experience
Connect	To purchase drugs
Connection	A drug supplier
Cooker	Receptacle for heating drugs before using intravenously
Cook up a pill	To prepare opium for smoking
Contact high	Vicarious experience that occurs by being with someone who is on a
Co-pilots	Amphetamine tablets
Cop	To purchase drugs, steal

Cop-out	To alibi, confess (withdraw)
Corine	Cocaine
Cotics	Narcotics
Cottonhead	User who recooks the cotton fibers found in cookers when in need of an injection
Crater	Gaping hole in a vein, by repeated injections at same spo
Crystals	Methedrine
Cube	Sugar cube impregnated with LSD: a non-user of drugs
Cubehead	Frequent user of LSD
Cut	To adulterate a narcotic by adding milksugar
Dabble	To take small amounts of drugs on an irregular basis
Dagga	Marijuana - India
D.D.	A fatal dose of narcotics or other drugs
Dealer	A drug supplier
Deck	A small packet of narcotics (heroin)
Dexies	Dexedrine (brand of dextroamphetamine sulfate, Smith,Klin
Dig	Appreciate, enjoy, understand
Dime bag	A ten-dollar purchase of narcotics
Dirty	In possession of narcotics; liable to arrest if searched
Dollies	Dolophine (brand of methadone hydrochloride, Eli Lilly an

TEACHER INFORMATION (continued)

ibi, confess (withdraw)

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tics

who recooks the cotton fibers found in cookers when their supply is up and they are eed of an injection

g hole in a vein, by repeated injections at same spot

edrine

cube impregnated with LSD: a non-user of drugs

uent user of LSD

dulterate a narcotic by adding milksugar

ake small amounts of drugs on an irregular basis

juana - India

tal dose of narcotics or other drugs

ug supplier

all packet of narcotics (heroin)

drine (brand of dextroamphetamine sulfate, Smith,Kline and French Laboratories) tablets

eciate, enjoy, understand

n-dollar purchase of narcotics

ossession of narcotics; liable to arrest if searched

phine (brand of methadone hydrochloride, Eli Lilly and Company) tablets

Dom	Known popularly as STP
Domino	To purchase drugs
Doojee	Heroin
Dope	Any narcotic
Doper	Regular user of narcotics
Double Blind	Term used in research to indicate that neither the patien which of several drugs or placebo is given on any occasio if results are attributed to the effects of the drug as p
Double trouble	Tuinal (brand of amobarbital sodium and secobarbital sodi
Do up	Supply of marijuana cigarettes
Down	Depressed feeling after drugs wear off
Downs	Depressants
Drivers	Amphetamines
Drop	To take by mouth
Drop a cap	Take a dose of LSD
Dropped	Arrested
Dummy	Purchase which did not contain narcotics
Dust	Cocaine
Dynamite	Narcotics of high potency
Ego games	A deprecative term applied by LSD users to social confor occupations and responsibilities of the majority of peop

TEACHER INFORMATION (continued)

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ase drugs

cotic

user of narcotics

ed in research to indicate that neither the patient or subject nor the experimenter know
f several drugs or placebo is given on any occasion. Considered a necessary condition
lts are attributed to the effects of the drug as pharmacologic agent.

(brand of amobarbital sodium and secobarbital sodium, Eli Lilly and Company) capsules

of marijuana cigarettes

ed feeling after drugs wear off

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mines

by mouth

dose of LSD

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e which did not contain narcotics

cs of high potency

cative term applied by LSD users to social conformity and to the normal activities,
ions and responsibilities of the majority of people

Elsie's shake	Morning glory seed
Ends	Money
Experience	An LSD trip
Eye-openers	Amphetamines
Factory	Equipment for injecting drugs
Fence	One who acts as a source of stolen goods from addict. Addict is goods and thus can afford his drugs.
Fix	An injection of narcotics
Flake	Cocaine
Flashback	A later repeat trip from the same dose
Flea powder	Poor quality narcotics
Flip	To become psychotic
Flip out	To lose mental control after using drugs
Floating	Under the influence of drugs (to be intoxicated by drugs)
Fly	Take narcotics
Flying high	Under the influence of marijuana
Footballs	Oval-shaped amphetamine sulfate tablets (a combination of dextroa
Freak out	To have unpleasant reactions while on a hallucinogenic trip
Fresh and sweet	Out of jail
Fruit Salad	Taking a mixture of pills

TEACHER INFORMATION (continued)

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for injecting drugs

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thus can afford his drugs.

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il

mixture of pills

Fuzz	The police, narcotics agent
Gage	Marijuana
Ganga	Marijuana (superior grade)
Gassed out	Overcome emotionally by an experience
Gassing	Sniffing gasoline fumes
Gee-head	Paregoric abuser
Geetis	Money
Geezer	A narcotic injection
Get high	Smoke marijuana
Gimmicks	The equipment for injecting drugs
Give wings	Inject somebody with heroin by vein
Girl	Cocaine
Glad rag	Cloth material or handkerchief saturated with the chemical
Gluey	Glue-sniffer
Gold dust	Cocaine
Goods	Narcotics
Good trip	Happy experience with psychedelics
Goofballs	Barbiturates
Goofed up	Under the influence of barbiturates
Gow-head	An opium addict

Grass	Marijuana
Grasshopper	Marijuana
Greenies	Green, heart-shaped tablets of dextroamphetamine sulfate a
Griefo	Marijuana
Groovy	Enjoyable
Gun	A hypodermic needle
H	Heroin
Hand-to-hand	Person-to-person delivery
Hang-up	A personal problem
Happening	A pseudo experience obtained through the use of lights an experience that one has with a drug
Happy cigarette	Marijuana cigarette
Happy dust	Cocaine
Hard stuff	Morphine, cocaine or heroin
Harness bulls	Uniformed officers
Harry	Heroin
Hash	Hashish; marijuana
Hawk	LSD
Hay	Marijuana
Hayhead	Marijuana user

TEACHER INFORMATION (continued)

rijuana

rijuana

een, heart-shaped tablets of dextroamphetamine sulfate and amobarbital

rijuana

joyable

hypodermic needle

eroin

erson-to-person delivery

personal problem

pseudo experience obtained through the use of lights and sound; to have the same type of
xperience that one has with a drug

arijuana cigarette

ocaine

orphine, cocaine or heroin

niformed officers

eroin

Hashish; marijuana

LSD

Marijuana

Marijuana user

TEACHER INFORMATION (continued)

Head	Regular user of a drug; (pothead, acidhead) an individual continually h marijuana or hashish
Hearts	Benzedrine or dexedrine (brands of amphetamine sulfate and dextroamphet Smith, Kline and French Laboratories) heart-shaped tablets
Heat	The police
Heavenly blues	A type of morning glory seed or LSD
Heeled	Having narcotics; having money
Hemp	Marijuana
High	Under the influence of drugs
Hikori	Mescaline - peyote
Hip (hep)	To understand
Hit	To purchase drugs, an arrest
Hocus	A narcotic solution ready for injection
Hog	An addict who uses all he can get his hands on
Holding	Possessing narcotics
Hooked	Addicted
Hophead	Narcotic addict
Hopped up	Under the influence of drugs
Horse	Heroin
Hot	Wanted by police
Hot shot	Fatal dosage of drugs

TEACHER INFORMATION (continued)

lar user of a drug; (pothead, acidhead) an individual continually high on LSD,
juana or hashish

edrine or dexedrine (brands of amphetamine sulfate and dextroamphetamine sulfate,
h, Kline and French Laboratories) heart-shaped tablets

police

pe of morning glory seed or LSD

ng narcotics; having money

juana

r the influence of drugs

aline - peyote

nderstand

urchase drugs, an arrest

rcotic solution ready for injection

ddict who uses all he can get his hands on

essing narcotics

icted

cotic addict

er the influence of drugs

oin

ted by police

al dosage of drugs

Hype	Narcotic addict
Ice cream habit	A small, irregular drug habit
In	Belonging or accepted by group
Intravenous	Directly into the vein
Jab	To inject drugs
Jag	Intoxication after using Benzedrine
Jive or jive-stick	Marijuana
Job	To inject drugs
Joint	A marijuana cigarette
Jolly beans	Pep pills, amphetamines
Jolt	An injection of narcotics; effects of the drug
Jones	The habit, an addict
Joy-pop	To inject small amounts of drugs irregularly
Joy powder	Heroin
Juice-head	User of liquor
Junk	Narcotics
Junkie	A narcotic addict
Juvies	Juvenile officers
Key	Kilogram of a drug; a pressed block of marijuana

Kick or kick habit	To abandon a drug habit
Kick parties	Parties or sessions where LSD is used
Kif	Marijuana in North Africa
Kilo	Large amount of narcotics
Lace	Money
L.A. Turnabouts	Amphetamines
Layout	The equipment for injecting drugs
Lemonade	Poor heroin
Lid	Approximately one ounce of marijuana
Lid proppers	Amphetamines
Lipton tea	Poor quality narcotics
Lit up	Under the influence of drugs
Locoweed	Marijuana
Long green	Money
M	Morphine
Machinery	Equipment for injecting drugs
Mainline	To inject drugs directly into a vein
Mainliner	One who injects narcotics into a vein
Maintaining	Keeping at a certain level of drug effect

Make a buy	To purchase drugs
Make a meet	To purchase drugs
Man	The police
Manicure	High-grade marijuana (i.e. no seeds or stems)
Mary Jane	Marijuana
Match box	Marijuana container; quantity marijuana
Member	Negro or someone other than white person
Mellow yellow	Banana peel
Mesc	Mescaline, the alkaloid in peyote
Mescal, mescal beans	Mescaline or peyote
Meth	Methedrine (also known as desoxyn) an amphetamine
Meth-head	Chronic user of methedrine
Meth monster	User of speed (Methedrine)
Mezz	Marijuana
Mickey Finn	Chloral hydrate
Mikes	Micrograms (millionth of a gram)
Miss Emma	Morphine
Mojo	Narcotics
Monkey	A drug habit where physical dependence is present

TEACHER INFORMATION (continued)

Moon	Peyote
Mor a grifa	Marijuana
Mugglehead	Marijuana user
Muggles	Marijuana
Mutah	Marijuana
Narco	Police officer (the law)
Narks	Slang term for the law enforcement officials concerned with narcotic
Needle	Hypodermic syringe
Nickel bag	A five-dollar purchase of narcotics
Nimby	Nembutal (brand of pentobarbital, Abbott Laboratories) capsules
Nod	To behave in a sleepy or lethargic manner
O.D.	Overdose
Off	Withdrawn from drugs
On a rip	Under the influence of LSD
On a trip	Under the influence of LSD or other hallucinogens
On the beam	Under the influence of marijuana
On the nod	Under the influence of drugs
On the street	Out of jail
On the stuff	Regular user or addict
Oranges	Dexedrine (brand of dextroamphetamine sulfate, Smith, Kline and Fren

TEACHER INFORMATION (continued)

:e

juana

juana user

juana

juana

ce officer (the law)

g term for the law enforcement officials concerned with narcotic abuse

dermic syringe

ve-dollar purchase of narcotics

utal (brand of pentobarbital, Abbott Laboratories) capsules

ehave in a sleepy or lethargic manner

dose

drawn from drugs

r the influence of LSD

r the influence of LSD or other hallucinogens

r the influence of marijuana

r the influence of drugs

of jail

ılar user or addict

edrine (brand of dextroamphetamine sulfate, Smith, Kline and French Laboratories) tablets

Outfit	The equipment and materials used by an addict to inject a dru
Out of the body	The feelings a person experiences while he is under the influ
Out of this world	Under the influence of marijuana
Outside myself	The feelings a person experiences while he is under the influ
Pack	A packet of heroin
Panic	Sudden shutting off of a drug supply
Pad	Drug user's home, apartment
Paper	A prescription or packet of narcotics
Peaches	Benzedrine (brand of amphetamine sulfate, Smith, Kline and F
Peanuts	Barbiturates
P.G. or P.O.	Paregoric
Peddler	Dealer in drugs
Pep pills	Stimulants
Piece	A container of drugs
Pinks	Seconal (brand of secobarbital, Eli Lilly and Company) capsu
Pill freak	Dangerous drug user
Pill head	Dangerous drug user
Pilly	Dangerous drug user
Plant	Cache of narcotics

TEACHER INFORMATION (continued)

The equipment and materials used by an addict to inject a drug intravenously

The feelings a person experiences while he is under the influence of LSD

Under the influence of marijuana

The feelings a person experiences while he is under the influence of LSD

A packet of heroin

Sudden shutting off of a drug supply

Drug user's home, apartment

A prescription or packet of narcotics

Benzedrine (brand of amphetamine sulfate, Smith, Kline and French Laboratories) tablets

Barbiturates

Paregoric

Dealer in drugs

Stimulants

A container of drugs

Seconal (brand of secobarbital, Eli Lilly and Company) capsules

Dangerous drug user

Dangerous drug user

Dangerous drug user

Cache of narcotics

TEACHER INFORMATION (continued)

Point	Paraphernalia for injecting narcotics
Pop	To inject drugs
Pot	Marijuana
Pothead	Marijuana user
Pot party	Marijuana party
Pure	Pure narcotics of very good grade
Purple hearts	Luminal
Pusher	Drug seller or supplier
Quill	A folded matchbox cover from which narcotics are sniffed through the
Rainbows	Tuinal (brand of amobarbital sodium and secobarbital sodium, Eli Lilly
Rap	Rapport
Reader	A prescription
Red birds	Seconal
Red devils	Seconal (brand of secobarbital, Eli Lilly and Company) capsules
Reefer	A marijuana cigarette
Reentry	A return from a "trip"
Roach	The butt of a marijuana cigarette
Roach holder	Device for holding the butt of a marijuana cigarette
Rope	Marijuana
Roses	Benzedrine (brand of amphetamine sulfate, Smith, Kline and French Lab

TEACHER INFORMATION (continued)

hernalia for injecting narcotics

ject drugs

uana

uana user

uana party

narcotics of very good grade

nal

seller or supplier

lded matchbox cover from which narcotics are sniffed through the nose

al (brand of amobarbital sodium and secobarbital sodium, Eli Lilly and Company) capsules

ort

escription

nal

nal (brand of secobarbital, Eli Lilly and Company) capsules

rijuana cigarette

turn from a "trip"

butt of a marijuana cigarette

ice for holding the butt of a marijuana cigarette

ijuana

zedrine (brand of amphetamine sulfate, Smith, Kline and French Laboratories) tablets

TEACHER INFORMATION (continued)

Royal blue	LSD
Rumble	Police in the neighborhood; a shakedown or search
Runner	Smuggler of illegal drugs
Sam	Federal narcotic agents
Satch cotton	Cotton used to strain narcotics before injection
Scat	Heroin
Schmeck	Heroin
Score	To purchase drugs
Script	Doctor's prescription
Seccies	Barbiturates
Seggy	Seconal (brand of secobarbital, Eli Lilly and Company) capsules
Sex juice	Aphrodisiac, supposedly a sex stimulant drug
Shake the habit	Completely conquer the habit
Shooting gallery	A place where narcotic addicts inject drugs
Shoot up or shoot	To inject drugs
Shrink	Psychiatrist (head shrinker)
Silk	A white person
Sitter	An experienced LSD user who helps or guides a new user
Skin popper	Occasional user of narcotics

TEACHER INFORMATION (continued)

Slammed	In jail
Smack	Heroin
Smashed	Intoxicated (drug or alcohol)
Smoke	Wood alcohol
Sneeze it out	Attempt to break the habit
Sniff	To sniff narcotics (usually heroin or cocaine) through the nose
Snort(ing)	To sniff powdered narcotics into nostrils
Snow	Cocaine
Speed	Methamphetamine, usually injected for rapid result
Speedball	An injection which combines a stimulant and depressant - often cocaine m morphine or heroin
Speedfreak	Compulsive high-dose user of methamphetamine
Spike	The needle used for injecting drugs
Square	A non-addict
Stack	A quantity of marijuana cigarettes
Stardust	Cocaine
Stash	A cache of narcotics
Stick	A marijuana cigarette
Stoned	Under the influence of narcotics
Stone head	Drug bum, inveterate user
Stool	Informer

TEACHER INFORMATION (Continued)

Stoolie	Informer
STP	A highly potent hallucinogen
Straight	In possession of narcotics
Strong out	Regular user of narcotics or addict
Strung out	Addicted
Stuff	Narcotics
Sugar	Powdered narcotics
Sugar cube	LSD
Sugar daddy	Drug supplier
Sunshine	LSD
Supplier	Drug source
Sweet Lucy	Marijuana
Swingman	A drug supplier
T	Marijuana
Take a band	Take drugs
Take-off	Take drugs
Take-up	Light a marijuana cigarette
Taste	Small quantity of narcotics usually given as sample or as reward
Tea shades	Dark shades or glasses used when taking pot and LSD due to dilated pupi
Texas tea or tea	Marijuana

The man	Dealer in drugs
Things	Various amounts of a narcotic
Thoroughbred	A high-type hustler who sells pure narcotics
To be dirty	To have drugs
To connect	To buy drugs
To be flush	To understand
To be hep	To understand
To be hip	To understand
To hit on	To buy drugs
To make a meet	To buy drugs
To make it	To try to buy drugs
To have savvy	To understand
Toke up	To light a marijuana cigarette
Tooies	Tuinal (brand of amobarbital sodium and secobarbital sodium, Eli
Torch up	Light a marijuana cigarette
Toss	Search
Tour guide	An experienced LSD user who helps or guides a new user
Toxy	The smallest container of prepared opium
Tracks	Scars along veins from many injections
Travel agent	An experienced LSD user who helps or guides a new user

TEACHER INFORMATION (continued)

er in drugs

ous amounts of a narcotic

gh-type hustler who sells pure narcotics

ave drugs

uy drugs

nderstand

nderstand

nderstand

uy drugs

uy drugs

try to buy drugs

nderstand

light a marijuana cigarette

nal (brand of amobarbital sodium and secobarbital sodium, Eli Lilly and Company) capsules

ht a marijuana cigarette

rch

experienced LSD user who helps or guides a new user

smallest container of prepared opium

rs along veins from many injections

experienced LSD user who helps or guides a new user

TEACHER INFORMATION (continued)

Trip, tripping	Being high on hallucinogens, particularly LSD
Trip out	To take drugs and have the drug experience, good or bad (bum trip)
Truck drivers	Amphetamine
Turkey	A capsule purported to be narcotic but filled with a non-narcotic substan
Turned off	Withdrawn from drugs
Turned on	Under the influence of drugs
Turps	Elixir of Terpin Hydrate with codeine, a cough syrup
Twist	Marijuana cigarette
Uncle	Federal narcotic agent
Ups	Stimulants
Up tight	Anxious, disturbed
Uppers	Stimulants, cocaine, and psychedelics
Vic	One who has been given a hot shot, a victim
Wake-ups	Amphetamine
Wakowi	Mescaline
Washed up	Withdrawn from drugs
Wasted	Under the influence of drugs
Weed	Marijuana
Weed-head	Marijuana user
Weekend habit	A small, irregular drug habit
Wedding bells	LSD

TEACHER INFORMATION (continued)

Whiskers	Federal narcotic agents
Whites	Amphetamine sulfate tablets
White stuff	Morphine
Wired	Under the influence of drugs (usually stimulants)
Works	Equipment for injecting drugs
Yellow-jackets	Nembutal (brand of pentobarbital, Abbot Laboratories) capsules (solid ye
Yen	Desire for
Yen hok	(Hock) instrument used in opium smoking; needle used to cook opium pellet
Yen Shee	Opium ash
Zunked	Intoxicated (drug or alcohol) usually addicted to hard drugs

XI. GLOSSARY

abstinence	- to refrain voluntarily from the use of something
addict	- it takes three things to make an addict - a psychologically mala available drug, and a mechanism for bringing them together
addiction	- the term favored by law enforcement officers rather than medical the body brought about by repeated or continuous use of a drug t the development of severe acute physical symptoms when the drug
analgesics	- any drug that is a pain reliever, therefore members of the opiu
barbiturate	- a large family of drugs derived from barbituric acid. They act nervous system. They are used medically for the relief of nerv anxiety, and in various other conditions in which sedation or a
benzedrine	- is an amphetamine derived from amphetamine sulfate. It is marke benzedrine
chronic	- in illness it refers to long-continued and usually not severe
cocaine	- a bitter, crystalline compound obtained from coca leaves that p
dangerous drugs	- a legal term which applies to barbiturates, amphetamines and ha
delusion	- false, often harmful impression regarding real things, stronger
demerol	- it is the most common of the synthetic narcotics. It is a depr muscles and is an effective pain reliever. It has some of the atraphine, the latter as a dilator of pupils
dexamyl	- drug containing dexedrine and the barbiturate amytal, syn: Xmas
dexedrine	- an amphetamine type drug
DMT	- chemical (N, N-dimethyltrytamine) related to the hallucinogen p
doriden	- drug similar to the barbiturate in action but of a different ch

XI. GLOSSARY

efrain voluntarily from the use of something

akes three things to make an addict - a psychologically maladjusted individual, an
lable drug, and a mechanism for bringing them together

term favored by law enforcement officers rather than medical personnel. A state of
body brought about by repeated or continuous use of a drug that is characterized by
development of severe acute physical symptoms when the drug is removed

drug that is a pain reliever, therefore members of the opium family are analgesics

rge family of drugs derived from barbituric acid. They act to depress the central
ous system. They are used medically for the relief of nervousness, tension and
iety, and in various other conditions in which sedation or anesthesia are indicated

n amphetamine derived from amphetamine sulfate. It is marketed under the trade name
edrine

illness it refers to long-continued and usually not severe

itter, crystalline compound obtained from coca leaves that produces euphoria

egal term which applies to barbiturates, amphetamines and hallucinogens

se, often harmful impression regarding real things, stronger than an illusion

is the most common of the synthetic narcotics. It is a depressant of the smooth
cles and is an effective pain reliever. It has some of the actions of morphine and
aphine, the latter as a dilator of pupils

g containing dexedrine and the barbiturate amytal, syn: Xmas trees

amphetamine type drug

mical (N, N-dimethyltrytamine) related to the hallucinogen psilocybin

g similar to the barbiturate in action but of a different chemical structure, syn: googers

GLOSSARY (continued)

drug	- any substance (other than food) which when introduced into the body, alte or function of the body
drug abuse	- a general term implying that a person habitually takes a drug that is una society in which the person lives
fence	- see drug abuse
habituated	- a state of mind in which the drug user (habitué) believes that the effect the drug are necessary to maintain an optimal state of well-being
habituation	- is a habit characterized by a desire for the drug, some psychic dependenc harm for the abuser of the drug
hallucination	- perception of objects with no reality or experience of sensations with n usually arising from disorder of the nervous system, as in delirium trem
hallucinogen	- a drug capable of causing a variety of psychic and perceptual changes in tions, visual illusions, decreased concentration, changes in mood, and a
heroin	- a strongly addictive narcotic made from morphine
heroin withdrawal symptoms	- severe aches of legs and back, nervousness, anxiety, sleeplessness, dila gooseflesh, yawning, running nose, sweating, vomiting, diarrhea, increas breathing, and a generally depressed state
illusion	- pleasant ascription of reality; only exists in fantasy
interpol	- international criminal police organization established in 1914
LSD	- an extremely active hallucinogenic drug derived from the wheat rust fung ergot (LSD-25, lysergic acid diethylamide)
marijuana	- drug derived from the flowering top of hemp plants which when smoked or to a dreamy state of altered consciousness

GLOSSARY (continued)

ibstance (other than food) which when introduced into the body, alters the structure
iction of the body

eral term implying that a person habitually takes a drug that is unacceptable to the
ty in which the person lives

rug abuse

te of mind in which the drug user (habitué) believes that the effects produced by
rug are necessary to maintain an optimal state of well-being

habit characterized by a desire for the drug, some psychic dependence and potential
for the abuser of the drug

ption of objects with no reality or experience of sensations with no external cause,
ly arising from disorder of the nervous system, as in delirium tremens

g capable of causing a variety of psychic and perceptual changes including hallucina-
, visual illusions, decreased concentration, changes in mood, and anxiety

ongly addictive narcotic made from morphine

e aches of legs and back, nervousness, anxiety, sleeplessness, dilation of the pupils,
flesh, yawning, running nose, sweating, vomiting, diarrhea, increase in heart rate and
hing, and a generally depressed state

ant ascription of reality; only exists in fantasy

national criminal police organization established in 1914

tremely active hallucinogenic drug derived from the wheat rust fungus commonly called
(LSD-25, lysergic acid diethylamide)

derived from the flowering top of hemp plants which when smoked or taken orally leads
dreamy state of altered consciousness

GLOSSARY (continued)

mescaline - the active hallucinogenic drug found in the American Cactus (Aztec nam

methadone - is a member of the opiate family of drugs. While it can be used as a most generally is used in the treatment of heroin and morphine addicts

methedrine - amphetamine derivative (see amphetamine) addicting, syn: crystal

morphine - a drug extracted from the opium poppy plant, addicting

narcotic - pain-relieving and sleep producing drugs of the morphine type. All ar

narcotic drug - by law, the narcotic drugs are those derived from coca leaves, opium a marijuana, and any substances neither chemically or physically disting

nembutal - a barbiturate, syn: yellows, yellow hornets, yellow jackets, nemmies

opiate - a narcotic drug similar to morphine in action

opiate poisoning - from an overdose of one of the opiate drugs. Three symptoms are: 1) c consciousness; 2) dilation of the pupils; 3) marked depression in the

opiod - a drug similar in action to the opiates but having a chemical structur to morphine

opium - crude extract from the poppy plant from which the narcotics morphine e

physical dependence - an altered physiological state produced by the repeated administratio necessitates the continued administration of the drug to prevent withd A condition that may accompany the chronic and excessive use of a drug takes large amounts of drugs on a regular basis, certain alterations c functions occur which when the drug is withdrawn or stopped may lead This illness or disease is called the withdrawal or abstinence syndro such drugs as heroin, morphine, demerol, methedrine, dexedrine and th

preludin - phenometrozine, a stimulant drug similar to the amphetamines and used

GLOSSARY (continued)

tive hallucinogenic drug found in the American Cactus (Aztec name: peyotyl)

ember of the opiate family of drugs. While it can be used as a drug of abuse, it enerally is used in the treatment of heroin and morphine addicts

amine derivative (see amphetamine) addicting, syn: crystal

extracted from the opium poppy plant, addicting

elieving and sleep producing drugs of the morphine type. All are addicting

, the narcotic drugs are those derived from coca leaves, opium and its derivatives, ana, and any substances neither chemically or physically distinguishable from them

biturate, syn: yellows, yellow hornets, yellow jackets, nemmies

otic drug similar to morphine in action

n overdose of one of the opiate drugs. Three symptoms are: 1) comatose or semi- iousness; 2) dilation of the pupils; 3) marked depression in the respiration rate

similar in action to the opiates but having a chemical structure unrelated rphine

extract from the poppy plant from which the narcotics morphine etc., are refined

tered physiological state produced by the repeated administration of a drug, which sitates the continued administration of the drug to prevent withdrawal symptoms. dition that may accompany the chronic and excessive use of a drug. If a person large amounts of drugs on a regular basis, certain alterations of his normal body ions occur which when the drug is withdrawn or stopped may lead to serious illness. illness or disease is called the withdrawal or abstinence syndrome and is seen with drugs as heroin, morphine, demerol, methedrine, dexedrine and the barbiturates

metrozine, a stimulant drug similar to the amphetamines and used particularly in Europe

GLOSSARY (continued)

psychedelic -	able to alter mental perception, syn: hallucinogens
psychological dependence -	(habituation) a pattern of drug use developed by persons who repea drugs and who eventually come to feel that they cannot carry on no unless they take drugs
seconal -	a barbiturate, syn: reds, red devils, red birds
stimulant -	chief class of drugs, of which the most commonly abused are the am drugs stimulate the central nervous system by producing excitation a temporary rise in blood pressure and respiration
STP -	an hallucinogenic drug closely related chemically to the amphetami action to mescaline
tolerance -	the necessity for taking higher and higher doses of a drug in orde
toxic inhalants -	inhaled fumes of airplane glue, paint thinner, gasoline and other Produce bodily damage, especially to the brain, liver, blood vesse
toxicity -	the quality of being poisonous
tranquilizer -	any drug capable of calming or quieting the emotional state of a p clarity of consciousness
volatile intoxicants or deliriants -	Airplane glue, lighter fluid, and paint thinner, gasoline and othe

GLOSSARY (continued)

er mental perception, syn: hallucinogens

n) a pattern of drug use developed by persons who repeatedly self-administer
ho eventually come to feel that they cannot carry on normal everyday activities
take drugs

te, syn: reds, red devils, red birds

of drugs, of which the most commonly abused are the amphetamines; this group of
late the central nervous system by producing excitation, alertness, wakefulness,
rise in blood pressure and respiration

ogenic drug closely related chemically to the amphetamines and similar in its
escaline

ty for taking higher and higher doses of a drug in order to get a desired effect

es of airplane glue, paint thinner, gasoline and other vapor-producing chemicals.
ily damage, especially to the brain, liver, blood vessels and kidneys

of being poisonous

pable of calming or quieting the emotional state of a patient without affecting
consciousness

ue, lighter fluid, and paint thinner, gasoline and other vapor-producing [illegible]

ALCOHOL

	Concepts	Teacher Materials	Stud
I.	Chemical names of some common types of alcohols: Methyl alcohol Isopropyl alcohol Propanol Ethyl alcohol	A Student Supplement to the Problem: Alcohol-Narcotics, The Texas Alcohol Narcotics Education Inc., 1969 A Syllabus in Alcohol Education, pp. 13-21 Alcohol and Alcoholism, pp. 17-18	
II.	The manufacturing process of beverages vary along with the contents and calorie count. A. The alcohol beverages of beer and ale are produced by malting B. Whisky, brandy, rum, and usually gin are prepared by distillation. C. Wine and hard cider are prepared by fermentation of the natural sugars already present in original product	Alcohol Education for Classroom and Community - A Source Book for Educators, pp. 71 - 76 "Thinking About Drinking" pp. 10-11 22-28	Dit

	Teacher Materials	Student Materials
es	A Student Supplement to the Problem: Alcohol-Narcotics, The Texas Alcohol Narcotics Education Inc., 1969 A Syllabus in Alcohol Education, pp. 13-21 Alcohol and Alcoholism, pp. 17-18	
	Alcohol Education for Classroom and Community - A Source Book for Educators, pp. 71 - 76 "Thinking About Drinking" pp. 10-11 22-28	Ditto: "Manufacturing Process, Percent Alcohol and Caloric Content of Different Alcoholic Beverages, Compared to Milk"

Audio Visual	Motivating Questions	Acti
Transparencies of the different types of alcohols and their uses:	What is the chemical structure of methyl alcohol and what are its uses?	Comp alco
"Methyl Alcohol" A-9-1 "Isopropyl Alcohol" A-9-2 "Propanol" A-9-3 "Ethyl Alcohol" A-9-4	What is the chemical structure of isopropyl alcohol and what are its uses?	Have prop
Transparency:	What is the chemical structure of propanol and give its uses?	Have of p alco
"The Amounts and Uses of Industrial Ethyl Alcohol" A-9-5 w/overlay	What is "grain alcohol"?	
Transparency:	What are the uses of ethyl alcohol besides as a beverage?	
"Uses of alcohol in industry" A-9-6 (a, b, c)		
Transparency:		
"Drinkable and Undrinkable Alcohols" A-9-7		
Transparency:	Are distilled beverages produced differently from fermented drinks?	Coll adve to t "4/ the
"Manufacturing Process, Percent Alcohol and Caloric Content Of Different Alcoholic Beverages, Compared With Milk" A-9-8	What is meant by the terms distillation and fermentation? Malting?	
Transparency:	How does a still operate?	Expe
"Distillation Apparatus" A-9-9	Explain what the term "proof" designates in describing alcoholic beverages	
	What is meant by the term "neutral spirits"?	

Motivating Questions	Activities
What is the chemical structure of methyl alcohol and what are its uses?	Compare the chemical formulas for ethyl alcohol with other alcohols.
What is the chemical structure of isopropyl alcohol and what are its uses?	Have the rapid learners look up the properties of the various alcohols.
What is the chemical structure of propanol and give its uses?	Have the students report on the methods of production for the various types of alcohols.
What is "grain alcohol"?	
What are the uses of ethyl alcohol besides as a beverage?	
Are distilled beverages produced differently from fermented drinks?	Collect some bottles or look at some pictures advertising alcohol beverages and indicate to the students what the terms "proof", "4/5 qt", "qt", and "fluid ounce" mean on the labels.
What is meant by the terms distillation and fermentation? Malting?	
How does a still operate?	Experiment:
Explain what the term "proof" designates in describing alcoholic beverages	Make a wine by using a fruit juice and yeast. Do this to show fermentation.
What is meant by the term "neutral spirits"?	

Concepts	Teacher Materials	Stud
D. Vodka is only water plus the alcohol		
III. The effects of alcohol on the body	Teaching About Alcohol, pp. 53-78	Ditt
A. The biological effects of alcohol on the body organs	Alcohol Education for Classroom and Community, pp. 77-89	"
1. In the digestive system the presence of alcohol will induce an increase in the amount of hydrochloric acid in the gastric juice. 2. The administration of alcohol will cause an increase in the pulse rate and blood pressure. 3. Cirrhosis of the liver is about 6 times as common in heavy drinkers as in the average population 4. The effects of alcohol on the brain are always a loss of efficiency.	Teacher Information: "Some Facts About Alcohol"	
B. Absorption of alcohol is direct because it does not have to be digested.		

eacher Materials	Student Materials
eaching About Alcohol, pp. 53-78	Ditto:
lcohol Education for Classroom nd Community, pp. 77-89	"Some Effects of Alcoholic Beverages"
eacher Information: "Some Facts bout Alcohol"	

Audio Visual	Motivating questions	Activities
	Which alcoholic drink has the most and which has the least number of calories per fluid ounce?	Experiment Set up distil concent
Transparencies: "Cirrhosis" A-9-10 "Some Effects of Alcoholic Beverages" A-9-11 (a & b)	What effect does alcohol have on the digestive system? Why does alcohol affect ulcers?	Assign to listing t effects o
	What effect does alcohol have on the circulatory system?	Using wal organs an
	Does alcohol cause cirrhosis of the liver? Why or why not?	Have the library o brain.
	Why is alcohol absorbed so quickly into the bloodstream?	Using the parency " discuss t tions of condition
	Where does most of the absorption of alcohol occur in the digestive system?	
	Is alcohol a stimulant or depressant?	
	What effects does alcohol have on the brain?	
	Can we term alcohol a narcotic?	

Motivating questions	Activities
Which alcoholic drink has the most and which has the least number of calories per fluid ounce?	Experiment: Set up the distillation apparatus and distill a diluted alcohol into a more concentrated solution.
What effect does alcohol have on the digestive system? Why does alcohol affect ulcers?	Assign to the students the project of listing the body organ systems and the effects of alcohol on each.
What effect does alcohol have on the circulatory system?	Using wall charts point out the various organs and the effects of alcohol on each.
Does alcohol cause cirrhosis of the liver? Why or why not?	Have the students do some research in the library on the effects of alcohol on the brain.
Why is alcohol absorbed so quickly into the bloodstream?	Using the overhead projector and the transparency "Some Effects of Alcoholic Beverages" discuss the effects of the various concentrations of alcohol in the blood, on mental condition, and on motor control.
Where does most of the absorption of alcohol occur in the digestive system?	
Is alcohol a stimulant or depressant?	
What effects does alcohol have on the brain?	
Can we term alcohol a narcotic?	

Concepts	Teacher Materials	Student Material
C. Disposition of alcohol by the body		
1. Urine, breath, perspiration and in the stools, are four routes of alcohol excretion. The total loss by excretion rarely exceeds between 2-10 per cent of the alcohol in the body.		
2. Oxidation is the process by which over 90 percent of the alcohol in the body is disposed.	Teaching About Alcohol, Frances Todd 1964, pp. 53-78	
a. Alcohol undergoes three successive changes before it can be used as fuel: Alcohol to acetaldehyde to acetic acid or acetate to carbon dioxide and water.	Alcohol Education for Classroom and Community, Raymond G. McCarthy, 1962, pp. 86-89	
b. The first step in the chemical breakdown of alcohol occurs almost entirely in the liver.		

Audio Visual	Motivating Questions	Activities
	What are four possible routes for alcohol to leave the body without the body breaking the alcohol down chemically?	
	How much alcohol (percent) is lost by excretion?	
Transparency: "Alcohol In The Body" A-9-12	How much of the alcohol is oxidized in the body (percent)?	Have the bett the physiolog
	What are the three successive changes that alcohol must undergo before it can be oxidized as a fuel by the cells?	
	Why is the liver important in the disposition of alcohol by the body?	Using the tra Body" discuss tion, oxidati
		Invite an M. effects of al

	Motivating Questions	Activities
	What are four possible routes for alcohol to leave the body without the body breaking the alcohol down chemically?	
	How much alcohol (percent) is lost by excretion?	
		Have the better students do research on the physiological processes of the liver
9-12	How much of the alcohol is oxidized in the body (percent)?	
	What are the three successive changes that alcohol must undergo before it can be oxidized as a fuel by the cells?	
	Why is the liver important in the disposition of alcohol by the body?	Using the transparency "Alcohol in the Body" discuss the physiology of absorption, oxidation, and excretion.
		Invite an M.D. to the class to discuss the effects of alcohol on the body.

ALCOHOL (continued)

Concepts	Teacher Materials	Student M
3. Each individual burns alcohol at his own rate. This rate is determined by the amount of alcohol enzyme produced in the liver. a. A large individual will usually burn alcohol faster than a small individual. b. The rate can be affected by malnutrition, liver diseases and drugs.		Ditto: "Why P Alcoho

	Teacher Materials	Student Materials
ohol te nt of n the		Ditto: "Why People React Differently to Alcohol"
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ted r		

Audio Visual	Motivating Questions	Activities
	What will affect the rate at which the alcohol is used up by each individual?	Assign some stu chemical proces hyde to acetic water.
	Why is alcohol not considered to be a food even if it can be used for energy?	Using wall char out the liver, the relationshi

Motivating Questions	Activities
What will affect the rate at which the alcohol is used up by each individual?	Assign some student to look up the chemical processes of alcohol to acetaldehyde to acetic acid to carbon dioxide and water.
Why is alcohol not considered to be a food even if it can be used for energy?	Using wall charts or transparencies point out the liver, kidneys, etc., and discuss the relationship to alcohol intake.

Concepts	Teacher Materials	Student M
IV. Drinking patterns in the United States.	The Problem: Alcohol-Narcotics, The Texas Alcohol-Narcotics Education Inc., 1969, p. 40	Have the articles magazines in the st
A. National surveys in 1960 reveal a number of facts: 1. Total abstainers over the age of 21 equalled 38%	"American Drinking Practices" from Quarterly Journal of Studies on Alcohol, Vol. 29, No. 1, pp. 130-151, March 1968	"American a kit of "Explorin by Public of Alcoho
2. More men than women drink: 69% to 38%	Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 12-23	Basic Han Milt, 196
3. Among those without a high school diploma only 48% drink as compared to 71% for college	Alcohol Education for Classroom and Community, Raymond G. McCarthy, 1962, pp. 125-131	
4. Those who earn $10,000 or more: 87% are drinkers. Those who earn less then $3,000: 50% are drinkers.		
5. Heavy drinkers are found most frequently in the three north-eastern regions of the country: New England, Middle Atlantic, and East North Central.		

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Teacher Materials	Student Materials
The Problem: Alcohol-Narcotics, The Texas Alcohol-Narcotics Education Inc., 1969, p. 40	Have the students make a collection of articles from recent newspapers and magazines regarding statistics on drinking in the states, the U.S. and the world.
"American Drinking Practices" from Quarterly Journal of Studies on Alcohol, Vol. 29, No. 1, pp. 130-151, March 1968	"American Attitudes Toward Drinking", from a kit of six leaflets entitled: "Exploring Alcohol Questions", distributed by Publications Division, Rutgers Center of Alcohol Studies.
Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 12-23	Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 12-22
Alcohol Education for Classroom and Community, Raymond G. McCarthy, 1962, pp. 125-131	

Audio Visual	Motivating Questions	Activities
Transparencies: "Statistics on the Percentage of Individuals Who Drink in the United States" A-9-13 "Percentage of Drinkers and Non-Drinkers from 1946-1960" A-9-14	What percentage of people over 21 drink in the U.S.?	Have the stud adults drink more, men or
	What is the ratio of men to women who drink?	Make a chart recent survey drinkers amon occupations, and nationali
	Do the less educated drink more than the well educated?	
	Do poor people tend to drink more than the wealthy?	Post articles the bulletin the U.S.
	Does where a person lives in the U.S. have anything to do with how much or how often he will drink? If so, where in the U.S. do people drink the most?	
	Do statistics indicate that the percent of persons drinking in the U.S. is increasing or decreasing?	Form a panel drinking patt to employ rec discussion.

	Motivating Questions	Activities
	What percentage of people over 21 drink in the U.S.?	Have the students estimate how many adults drink in the U.S. Who drinks more, men or women.
ntage in the	What is the ratio of men to women who drink?	Make a chart using statistics from a recent survey showing the percentage of drinkers among the various age groups, occupations, sexes, locations in the U.S. and nationalities.
and 960"	Do the less educated drink more than the well educated?	
	Do poor people tend to drink more than the wealthy?	Post articles from recent newspapers on the bulletin board regarding drinking in the U.S.
	Does where a person lives in the U.S. have anything to do with how much or how often he will drink? If so, where in the U.S. do people drink the most?	
	Do statistics indicate that the percent of persons drinking in the U.S. is increasing or decreasing?	Form a panel from the class to discuss drinking patterns in the U.S. Ask them to employ recent statistics in their discussion.

ALCOHOL (continued)

Concepts	Teacher Materials	Stude
B. Consumption of alcohol in the U.S. as compared with other beverages in a 1965 survey disclosed: 1. Milk is the most common beverage with coffee second. 2. Beer and ale were third on the list with distilled spirits near the bottom.		
C. The number of heavy drinkers in the United States is estimated to be ten percent of the population. 1. Among heavy drinkers men outnumber women 4 to 1. 2. It is estimated that one out of fifteen drinkers are afflicted with the disease of alcoholism.	Alcohol Education for Classroom and Community, Raymond G. McCarthy, 1962,1969 pp. 140-141 Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 22-23	Basi

	Teacher Materials	Student Materials
cohol in the with other 65 survey		
ost common coffee		
were third ith distil- ear the		
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rinkers women		
ed that fteen afflicted ase of		

Audio Visual	Motivating Questions	Activit
Transparency: "Alcohol Consumption as Compared With Other Beverages" A-9-15	Which beverage is consumed most in the United States? Second? Which alcoholic beverage is used most in the United States?	Make a people parts o
Transparency: "Percentage of Drinkers and Non-Drinkers from 1946-1960" A-9-14	What is the ratio of men to women among the heavy drinkers?	Have t would
	Of those who drink - what percentage would be considered to be alcoholics?	Have t they t drink.
	Do statistics indicate that the percentage of persons drinking in the U.S. has increased, decreased or remained the same during the past 20 years?	

	Motivating Questions	Activities
ompared -15	Which beverage is consumed most in the United States? Second? Which alcoholic beverage is used most in the United States?	Make a list of some reasons you think people may drink more heavily in some parts of the U.S. than in others.
	What is the ratio of men to women among the heavy drinkers?	Have the students discuss what they would consider a heavy drinker to be.
nd Non- A-9-14	Of those who drink - what percentage would be considered to be alcoholics?	Have the students list the reasons why they think that more men than women drink.
	Do statistics indicate that the percentage of persons drinking in the U.S. has increased, decreased or remained the same during the past 20 years?	

ALCOHOL (continued)

Concepts	Teacher Materials	Studen
V. The development of an alcoholic. A. The symptoms of alcoholism may be divided into three stages: 1. The early stage includes symptoms of lying about drinking, ability to handle more alcohol than others, beginning of blackouts when parts of the previous evening cannot be remembered. 2. The middle stages includes symptoms of increased solitary drinking, individual resents being told about his drinking, when starting to drink individual puts the first few down fast, wants to have alcohol around at all times, and drinks to calm unexplainable fears and "nerves". 3. The late stages includes symptoms from the earlier stages plus: feelings of depression, guilt and/or sickness most of the time; neglecting to eat; an obsession with fears, a need to drink during most of the day.	Alcoholism - A Sickness That Can Be Beaten, Alton L. Blakeslee, 1964, pp. 7-8 "Phases of Alcohol Addiction", E.M. Jellinek, pp. 676-683 "Alcoholism: The Public Health Approach" Leonard J. Duhl, M.D., reprint dist. by Rutgers Center of Alcohol Studies. "New Light on Alcoholism", Seldon D. Bacon, distributed by Rutgers Center of Alcohol Studies "Alcoholism the Illness", Bill W., distributed by Rutgers Center of Alcohol Studies "Understanding Alcoholism", Welham L. Keaton, distributed by Mich. Alcohol Education Foundation "The Modern Approach to Alcoholism" by Good Reading Rack Service, Inc., 1965	"Explo contai Rutger Ditto: "Th Ditto: "Wh Is Basic 1969,

	Teacher Materials	Student Materials
holic. lism hree	Alcoholism - A Sickness That Can Be Beaten, Alton L. Blakeslee, 1964, pp. 7-8	"Exploring Alcohol Questions", kit containing six leaflets, distributed by Rutgers Center of Alcohol Studies
	"Phases of Alcohol Addiction", E.M. Jellinek, pp. 676-683	Ditto: "The Drinking Phases of Alcoholism"
ncludes about to l than of	"Alcoholism: The Public Health Approach" Leonard J. Duhl, M.D., reprint dist. by Rutgers Center of Alcohol Studies.	Ditto: "What Alcoholism Is - What Alcoholism Is Not"
ts of ing can-	"New Light on Alcoholism", Seldon D. Bacon, distributed by Rutgers Center of Alcohol Studies	Basic Handbook on Alcohol, by Harry Milt, 1969, pp. 24-27
includes ased sol- ndividual d about	"Alcoholism the Illness", Bill W., distributed by Rutgers Center of Alcohol Studies	
n start- vidual w down ve all	"Understanding Alcoholism", Welham L. Keaton, distributed by Mich. Alcohol Education Foundation	
to calm rs and	"The Modern Approach to Alcoholism" by Good Reading Rack Service, Inc., 1965	
ncludes earlier ings of and/or the time; ; an ars, uring		

Audio Visual	Motivating Questions	Activi
Transparencies:	What are the early symptoms of alcoholism?	Using go ove
"The Drinking Phases of Alcoholism - Earliest Danger Symptoms" A-9-16	What does it mean to "blackout"?	Hold a classi with a into c alcoho
"Middle Stages" A-9-17	Why do we call alcoholism an illness?	
Late Stages" A-9-18		
Poster:	Why do we divide the symptoms of alcoholism into stages?	Discus What A studen own as
"A Case History of an Alcoholic"	What are the symptoms of an alcoholic in the middle stages of the disease?	
Poster:		Have t of wha Discus istica
"Heavy Drinker - Closer to the Grave"	Is everyone who drinks to calm his "nerves" an alcoholic?	
	What are the characteristics of an alcoholic in the final stages of the disease?	

	Motivating Questions	Activities
	What are the early symptoms of alcoholism?	Using the ditto: "Phases of Alcoholism" go over the various symptoms.
lcoholism - A-9-16	What does it mean to "blackout"?	Hold a panel discussion concerning the classification of an imaginary character with a number of symptoms of alcoholism into one of the three stages of alcoholism.
	Why do we call alcoholism an illness?	
	Why do we divide the symptoms of alcoholism into stages?	Discuss the ditto: "What Alcoholism Is - What Alcoholism Is Not" Suggest the students think up some ideas of their own as to what alcoholism is or is not.
coholic"	What are the symptoms of an alcoholic in the middle stages of the disease?	
to the	Is everyone who drinks to calm his "nerves" an alcoholic?	Have the students list the characteristics of what they think an alcoholic is like. Discuss the validity of these characteristics.
	What are the characteristics of an alcoholic in the final stages of the disease?	

Concepts	Teacher Materials	Student Mat
VI. The possible causes of alcoholism are numerous A. A number of researchers suggest that the cause may be associated with physiological causes. 1. One researcher says a congenital nutritional peculiarity is the cause. In these people there is a need for vitamins which is not met by the foods in their everyday diet. 2. Another theory states that alcoholics lose salt and water at a higher rate than is normal and the resultant low blood chloride level triggers an abnormal craving for alcohol. 3. Another theory places the cause with a metabolic disturbance resulting from excessive drinking. In this condition, the cells in the brain of the drinker as well as in other parts of the body function more efficiently in the presence of alcohol.	"Alcoholism - A Sickness Than Can Be Beaten", Alton L. Blakeslee, 1964, pp. 6-7 "Understanding Alcoholism", L. Keaton, distributed by Mich. Alcohol Education Foundation Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 28-55 Teaching About Alcohol, Frances Todd, 1964, pp. 122-123 Teacher Information: A. "Some Possible Causes of Alcoholism" B. "Some Social and Psychological Problems Which are not Caused by Alcohol"	Basic Handb 1969, pp. 2

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Teacher Materials	Student Materials
"Alcoholism - A Sickness Than Can Be Beaten", Alton L. Blakeslee, 1964, pp. 6-7 "Understanding Alcoholism", L. Keaton, distributed by Mich. Alcohol Education Foundation Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 28-55 Teaching About Alcohol, Frances Todd, 1964, pp. 122-123	Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 28-55

Teacher Information:

A. "Some Possible Causes of Alcoholism"

B. "Some Social and Psychological Problems Which are not Caused by Alcohol"

Audio Visual	Motivating Questions	Activ
Posters: "Prevention of Alcoholism" "A Case History of an Alcoholic"	What does physiology mean?	Have phys body.
	What parts of the body might some of the physiological causes be related to?	Assi the of t stud
	What does metabolism mean? How might the metabolism of the human body be related to alcoholism?	Invi rega phys

	Motivating Questions	Activities
	What does physiology mean?	Have the students write reports on the physiological effects of alcohol on the body.
lic"	What parts of the body might some of the physiological causes be related to?	Assign the creation of charts showing the human anatomy and illustrating one of the physiological theories we have studied.
	What does metabolism mean? How might the metabolism of the human body be related to alcoholism?	Invite an M.D. to speak to the class regarding current theories on the physiological causes of alcoholism

ALCOHOL (continued)

Concepts	Teacher Materials	Student Mate
B. Research in the area of psychology reveals several theories		
1. One study indicates that alcoholism is found only among people with mental and emotional disabilities.		
2. Among personality abnormalities linked with alcoholism are oral influences of childhood, homosexuality, a need to dominate, a feeling of inferiority, insecurity, and lack of love during infancy.	Alcoholism and Society, Morris E. Chafetz, M.D., and Harold W. Demone, Jr., 1962, pp. 33-61 "The Modern Approach to Alcoholism" Good Reading Rack Service, Inc., 1965 pp. 3-6	
C. Some researchers note that the tendence toward alcoholism may be inherited. (Not proven)		
VII. There are a number of myths about alcoholism - its cause, symptoms, and cure	Student Ditto: "The Five Myths About Alcoholism"	Ditto: "The Five
A. Myth one: "Alcoholics are found mainly on skid row"	"Myths About Drinking", distributed by Michigan Education Foundation	"Myths About Michigan Edu
B. Myth two: "Alcoholics are hopeless drunks"		
C. Myth three: "Alcohol is the cause of alcoholism"		
D. Myth four: "Alcoholics could recover if they had enough will power"		
E. Myth five: "Alcoholism is a self inflicted moral problem"		

	Teacher Materials	Student Materials
a of psycho- l theories		
ates that ound only th mental isabilities.		
ty abnormal- th alcoholism nces of sexuality, a e, a feeling insecurity, e during	Alcoholism and Society, Morris E. Chafetz, M.D., and Harold W. Demone, Jr., 1962, pp. 33-61 "The Modern Approach to Alcoholism" Good Reading Rack Service, Inc., 1965 pp. 3-6	
te that the oholism may proven)		
yths about symptoms,	Student Ditto: "The Five Myths About Alcoholism"	Ditto: "The Five Myths About Alcoholism"
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lism is a al problem"		

Audio Visual	Motivating Questions	Activities
	Can you think of any ways in which the psychology of an individual might cause him to become alcoholic?	Assign the c psychologica who drink he alcoholism
	What are some personality abnormalities that might be linked with alcoholism?	Discuss the alcoholism.
	What are the characteristics of an individual who has the feeling of inferiority, insecurity and a lack of love?	Assign a st psychology of persons and a lack others.
	What percentage of the alcoholics in the U.S. do you think are found living on skid row?	Ask the stu own of "myt alcoholics. ments they which they
	Are alcoholics "hopeless drunks" or can they be cured?	
	Can an alcoholic be cured if he has enough "will power"?	
	Can we say that alcohol is a cause of alcoholism?	
	True or false: the alcoholic cannot be helped. He is a hopeless drunk.	

Motivating Questions	Activities
Can you think of any ways in which the psychology of an individual might cause him to become alcoholic?	Assign the creation of a list of the psychological characteristics of persons who drink heavily and have some traits of alcoholism
What are some personality abnormalities that might be linked with alcoholism?	Discuss the psychological factors behind alcoholism.
What are the characteristics of an individual who has the feeling of inferiority, insecurity and a lack of love?	Assign a student to locate some books on psychology and list the characteristics of persons who feel inferiority, insecurity, and a lack of emotional feeling toward others.
What percentage of the alcoholics in the U.S. do you think are found living on skid row?	Ask the students to make lists of their own of "myths" about alcoholism or alcoholics. Make another list of statements they have heard made about alcoholism which they are not sure are myths or facts.
Are alcoholics "hopeless drunks" or can they be cured?	
Can an alcoholic be cured if he has enough "will power"?	
Can we say that alcohol is a cause of alcoholism?	
True or false: the alcoholic cannot be helped. He is a hopeless drunk.	

ALCOHOL (continued)

Concepts	Teacher Materials	Student
VIII. The treatment of alcoholism is many sided and varies with the individual	Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 56-82	"Explor distrib Studies
A. Most experts agree there are three basic rules that are imperative for the treatment of alcoholics	Alcohol Education for Classroom and Community, Raymond G. McCarthy, 1964 pp. 191-240	Basic H 1969, p
1. Alcoholic must want to be treated 2. Alcoholic must continue with the treatment 3. Alcoholic must want to become well or recover	"Alcoholics and Alcoholism", Harry Milt, 1967, pp. 17-23 Teaching About Alcohol, Frances Todd, 1964, pp. 125-130 Teacher Information:	
B. The chronic alcoholic may require medical treatment for physical illness.	A."Individual Treatment for Alcoholism"	
C. Since most alcoholics are deficient in essential food elements, some sort of nutritive treatment is necessary	B."A Summary of Treatment for the Alcoholic"	
D. Tranquilizers and sedatives may be found essential during the acute withdrawal phase of the alcoholic.		
E. Many of the alcoholics may need some type of psychotherapy		

	Teacher Materials	Student Materials
n is many individual	**Basic Handbook on Alcoholism**, Harry Milt, 1969, pp. 56-82	"Exploring Alcohol Questions" kit distributed by Rutgers Center on Alcoh Studies
re are are imp- ent of	**Alcohol Education for Classroom and Community**, Raymond G. McCarthy, 1964 pp. 191-240	**Basic Handbook on Alcoholism**, Harry M 1969, pp. 56-82
t to be	"Alcoholics and Alcoholism", Harry Milt, 1967, pp. 17-23	
tinue	**Teaching About Alcohol**, Frances Todd, 1964, pp. 125-130	
t to cover	Teacher Information:	
may re- nt for	A. "Individual Treatment for Alcoholism"	
	B. "A Summary of Treatment for the Alcoholic"	
are l food f nut- ecessary		
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s may cho-		

Audio Visual	Motivating Questions	Activitie
Poster: "Prevention of Alcoholism" Film: "Alcohol and You" Filmstrip: "Understanding Alcohol" w/record & guide #76	What are some ways in which an alcoholic may be treated? Why is an alcoholic usually in need of some nutritive treatment? What is "chronic alcoholism"? Does the alcoholic have to want to be treated in order to recover? Can an alcoholic be cured of the desire for alcohol? Why do experts feel that the only cure is complete abstention from alcohol? What medical use is there for tranquilizers and sedatives during the acute withdrawal phase of the alcoholic? What does psychotherapy mean? How may psychotherapy help the alcoholic?	Discuss t such a di Assign th on the va alcoholis Have a st community ing the t city. Write a l for info ment of a

Motivating Questions	Activities
What are some ways in which an alcoholic may be treated? Why is an alcoholic usually in need of some nutritive treatment? What is "chronic alcoholism"? Does the alcoholic have to want to be treated in order to recover? Can an alcoholic be cured of the desire for alcohol? Why do experts feel that the only cure is complete abstention from alcohol? What medical use is there for tranquilizers and sedatives during the acute withdrawal phase of the alcoholic? What does psychotherapy mean? How may psychotherapy help the alcoholic?	Discuss the reasons why alcoholism is such a difficult disease to cure. Assign the students to complete a report on the various methods of treatment for alcoholism. Have a student contact an M.D. in the community to report to the class regarding the treatment of alcoholism in this city. Write a letter to the local A.A. asking for information on the causes and treatment of alcoholism.

ALCOHOL (continued)

Concepts	Teacher Materials	Student Mat
F. Some drugs are used to break the habit of drinking; these drugs make the users ill in the presence of alcoholic beverages.	Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 71-82 Teaching About Alcohol, Frances Todd, 1964, pp. 106-119	
G. There are many public centers for the treatment of alcoholics plus a group called Alcoholics Anonymous.	A Syllabus in Alcohol Education Bertha Rachel Palmer, 1962, pp. 54-59	Ditto: "Twelve
IX. There are social problems associated with heavy drinking and alcoholism.		Ditto: "Some So Which Ar
A. Drinking may have a significant effect upon family life.	Alcohol Education for Classroom and Community, Raymond G. McCarthy, 1964, pp. 143-188	Ditto: "An Alco
1. Lack of communication between parents; may result in mental or physical abuse.	Teacher Information: "Fact Sheet - Alcoholic Father"	Ditto:
2. May lead to diminished moral standards and divorce	Teacher Information: "Some Statistics on Alcohol and Crime"	"Some St
3. May result in financial waste and possibly in complete loss of employment	"The Adjustment of the Family to the Crisis of Alcoholism", Joan K. Jackson, dist. by Rutgers Center of Alcohol Studies	
B. Some crimes are associated with alcoholism.	"Youth and the Alcoholic Parent" dist. by Al-Anon Family Group Headquarters, Inc.	
C. Drinking is widely associated with auto accidents	"Alcoholism - An Employee Health Problem", Lewis F. Presnall, dist. by the National Council on Alcoholism, Inc.	

	Teacher Materials	Student Materials
to break ng; these s ill in oholic	Basic Handbook on Alcoholism, Harry Milt, 1969, pp. 71-82 Teaching About Alcohol, Frances Todd, 1964, pp. 106-119	
ic centers f alcoholics Alcoholics	A Syllabus in Alcohol Education Bertha Rachel Palmer, 1962, pp. 54-59	Ditto: "Twelve Steps with A.A."
ms asso- ing and		Ditto: "Some Social and Psychological Problems Which Are Not Caused By Alcohol"
a signif- family life.	Alcohol Education for Classroom and Community, Raymond G. McCarthy, 1964, pp. 143-188	Ditto: "An Alcoholic Father"
ication s; may al or	Teacher Information: "Fact Sheet - Alcoholic Father"	Ditto: "Some Statistics on Alcohol and Crime"
minished s and	Teacher Information: "Some Statistics on Alcohol and Crime"	
financial ibly in of employ-	"The Adjustment of the Family to the Crisis of Alcoholism", Joan K. Jackson, dist. by Rutgers Center of Alcohol Studies	
sociated	"Youth and the Alcoholic Parent" dist. by Al-Anon Family Group Headquarters, Inc.	
asso- ccidents	"Alcoholism - An Employee Health Problem", Lewis F. Presnall, dist. by the National Council on Alcoholism, Inc.	

Audio Visual	Motivating Questions	Activities
	What are some other organizations associated with the treatment of alcoholism?	Invite an of the class re how they hel Using the di A.A., discus method of tr
Poster: "What Alcoholics Anonymous Means"	What is the Alcoholics Anonymous organization? How do they help alcoholics?	
	What are the"twelve steps" of A.A.?	
Filmstrip: "Alcohol" #77	What effect may drinking have on the family pattern of living?	Have the st a paper on u drinking an and drinking
	What effect may drinking have on the financial condition of the family?	Form a panel the communit viewpoint o juvenile co an employme court judge. Select a pa associated Discuss the has when as family. Di such proble
	What crimes might be associated with drinking?	Have each s alleviate d
	Why is drinking so closely associated with auto accidents?	

Motivating Questions	Activities
What are some other organizations associated with the treatment of alcoholism?	Invite an official of A.A. to speak to the class regarding the organization and how they help alcoholics.
	Using the ditto on the twelve steps with A.A., discuss the psychology behind their method of treatment.
What is the Alcoholics Anonymous organization? How do they help alcoholics?	
What are the"twelve steps" of A.A.?	
What effect may drinking have on the family pattern of living?	Have the students do research and write a paper on up to date statistics regarding drinking and crime, drinking and divorce, and drinking and auto accidents.
What effect may drinking have on the financial condition of the family?	Form a panel with each student discussing the community drinking problem from the viewpoint of: a traffic officer, a juvenile court judge, an athletic coach, an employment counselor, a divorce court judge.
	Select a panel to discuss the problems associated with drinking in the family. Discuss the problems that an adolescent has when associated with drinking in the family. Discuss ways to help alleviate such problems.
What crimes might be associated with drinking?	Have each student list possible ways to alleviate drinking problems in the home.
Why is drinking so closely associated with auto accidents?	

ALCOHOL (continued)

Concepts	Teacher Materials	St
D. Drinking may have an adverse effect on employment with loss of productivity.	"Alcohol, Alcoholism, and Crime" Selden D. Bacon, dist by Rutgers Center of Alcohol Studies "Young People and A.A.", dist. by Alcoholics Anonymous World Services, Inc.	
X. There are various reasons given why teenagers drink alcoholic beverages in the U.S. A. Teenagers drink because it is a widespread adult custom in this country B. Teenagers drink because of social pressures from their peer group C. Some teenagers learn to use alcohol in the home D. Many teenagers drink to defy the laws and feel "grown up" E. The probability that a teenager will be a user of alcoholic beverages increases with age. F. The male in our society is more likely to drink than the female among both adults and teenagers	"How Alcohol Affects the Body" Mark Keller, pamphlet No.3 on Alcohol Problems Teaching About Alcohol, Frances Todd, 1964, pp. 7-16 "Report on the Conference on Youth and Alcohol" Commonwealth of Penn., April 30, 1966 Teacher Information: "The Social Characteristics of Teenage Users" Teacher Information: "Adolescents and Alcohol"	Di

	Teacher Materials	Student Materials
n adverse t with y.	"Alcohol, Alcoholism, and Crime" Selden D. Bacon, dist by Rutgers Center of Alcohol Studies	
	"Young People and A.A.", dist. by Alcoholics Anonymous World Services, Inc.	
ons given coholic	"How Alcohol Affects the Body" Mark Keller, pamphlet No.3 on Alcohol Problems	Ditto: "Adolescents and Alcohol
cause adult ntry cause s from	Teaching About Alcohol, Frances Todd, 1964, pp. 7-16 "Report on the Conference on Youth and Alcohol" Commonwealth of Penn., April 30, 1966	
rn the home nk to feel	Teacher Information: "The Social Characteristics of Teenage Users"	
at a user ages e. ciety is nk than oth ers	Teacher Information: "Adolescents and Alcohol"	

Audio Visual	Motivating Questions	Activitie
	How may drinking affect a person's ability to do his job?	
Filmstrip: "Tobacco and Alcohol - the $50,000 Habit"	As a teenager, what are some reasons why you would drink? Why you would not drink?	Have the why they some do n
	Why are many teenagers pressured into drinking by peer pressure?	Organize and cons reasons w why some
	Why does drinking make some teenagers feel grown up?	Make a su what per and do n
	Do you think drinking in the home with the parents might later cause the teenager to drink outside the home? Why or why not?	
	Why do you think men are more likely to drink in our society than women?	

Motivating Questions	Activities
How may drinking affect a person's ability to do his job?	
As a teenager, what are some reasons why you would drink? Why you would not drink?	Have the students make a list of reasons why they feel some teenagers drink and some do not.
Why are many teenagers pressured into drinking by peer pressure?	Organize a panel to discuss the pros and cons of drinking in the home. Discuss reasons why teenagers begin drinking, why some drink more than others.
Why does drinking make some teenagers feel grown up?	Make a survey of the school to learn what percentage of the students drink and do not drink.
Do you think drinking in the home with the parents might later cause the teenager to drink outside the home? Why or why not?	
Why do you think men are more likely to drink in our society than women?	

ALCOHOL (continued)

Concepts	Teacher Materials
G. Teenage users of alcohol are most likely to be found in the upper and lower third of the range of socio-economic status	
H. Urban teenagers as well as adults are more likely to drink than rural teenagers or adults.	
XI. The various laws pertaining to the use of alcohol are set up by each state. A. Laws are of two main kinds: 1. Those restricting the availability of alcohol 2. Those prohibiting its use by certain categories of people.	Alcohol Education for Classroom an Community, Raymond G. McCarthy, 1964, pp. 11-31 The Problem: Alcohol-Narcotics, The Texas Alcohol Narcotics Educ., Inc., 1969, pp. 46-47 Teaching About Alcohol, Frances Todd, 1964, pp. 79-93 Teenage Drinking, Margaret Bacon and Mary Brush Jones, 1968, pp. 113-121
B. All states agree on prohibition of the sale of liquor to minors but disagree on the definition of "minor"	
C. In nearly all states it is illegal for a teenager to be employed by anyone who manufactures, distributes, or sells alcoholic beverages.	

	Teacher Materials	Student Materials
hol are nd in hird o-		
ell as y to hagers		
ing to et up	Alcohol Education for Classroom and Community, Raymond G. McCarthy, 1964, pp. 11-31	Ditto: "Liquor Laws Regarding Minc
kinds: g the	The Problem: Alcohol-Narcotics, The Texas Alcohol Narcotics Educ., Inc., 1969, pp. 46-47	
	Teaching About Alcohol, Frances Todd, 1964, pp. 79-93	
g its at- e.	Teenage Drinking, Margaret Bacon and Mary Brush Jones, 1968, pp. 113-121	
pro- e of t dis- tion of		
s it is ger to ne who ibutes, bev-		

Audio Visual	Motivating Questions	Activities
	For what reasons do you think city youngsters might be more apt to drink than youngsters from the country?	
Film: "There's A Message In Every Bottle" #1330	Why are there laws controlling the manufacture, sale, and use of alcoholic beverages?	Assign the s specific law beverages in
	What are the laws of your state concerning the use of alcoholic beverages?	Assign stude history of l beverages.
	What effect have the laws had on the control of teenage drinking?	
	It seems that laws have had little effect in reducing the number of teenage drinkers. Why?	
	Who is legally responsible in Montana when liquor is sold to a minor who had false identification?	
	Do you feel that the laws should be changed concerning the use of alcoholic beverages by a minor? Why or why not?	

Motivating Questions	Activities
For what reasons do you think city youngsters might be more apt to drink than youngsters from the country?	
Why are there laws controlling the manufacture, sale, and use of alcoholic beverages?	Assign the students to do research on the specific laws that control alcoholic beverages in this city and state.
What are the laws of your state concerning the use of alcoholic beverages?	Assign students a research paper on the history of laws concerning alcoholic beverages.
What effect have the laws had on the control of teenage drinking?	
It seems that laws have had little effect in reducing the number of teenage drinkers. Why?	
Who is legally responsible in Montana when liquor is sold to a minor who had false identification?	
Do you feel that the laws should be changed concerning the use of alcoholic beverages by a minor? Why or why not?	

ALCOHOL (continued)

Concepts	Teacher Materials	Student Materials
D. Who is legally responsible when liquor is sold to a minor depends somewhat on the various state laws.		
E. The penalties for breaking liquor laws vary a great deal in severity according to the states		
F. The effects of the various laws upon teenage drinking is difficult to evaluate:		
1. It is clear that laws have not eliminated teenage drinking.		
2. It seems these laws have had little effect in reducing the number of teenagers who drink.		

Audio Visual	Motivating Questions	Activities

XII. TEACHER INFORMATION

SOME FACTS ABOUT ALCOHOL

(from: Thinking About Drinking, Public Health
Service Publication No. 1683, pp. 22-28)

Alcohol is a special type of drug; it affects the nervous system after it reaches the bra

Alcohol is called a food because it contains calories. But it is not a proper substitute
a balanced diet since it is almost completely lacking in the many other nutrients needed
of good health.

Alcohol does not have to be digested slowly, as most other foods must be, before reachin
Alcohol is immediately absorbed into the blood, passing directly through the walls of the
intestine. The blood rapidly carries it to the brain. This is why alcohol may affect a

The body burns up alcohol through the process of oxidation - a series of chemical chang
to release energy. Oxidation takes place mostly in the liver, which needs about one hou
of alcohol; this is the amount contained in one average highball, one glass of wine, or
while, the unoxidized alcohol remains in the blood stream and continues to have an effect

Alcohol is generally a depressant, not a stimulant; but sometimes a drinker imagines that
This is why:

> Alcohol's first effect on the brain is to slow down the brain area that controls ju
> thought. Thus, alcohol may interfere with a person's normal ability to do certain
> to remember; to understand; to reason; to make decisions.
> In slowing down this area, alcohol releases the drinker's inhibitions which usually
> behavior. Since he is less inhibited, more relaxed, he may at first feel unusually
> easy and gay. But his nervous system is being depressed, not stimulated; and this
> action increases if the person continues to drink.
> Alcohol also tends to slow down the brain area that controls muscular coordination.
> alcohol may also interfere with a person's normal ability to do certain physical ta
> coordinate movement of his arms and legs; to speak clearly; to balance himself.

Reactions to alcohol vary tremendously. Different people react differently to the same
the same person may react differently to the same amount of alcohol under different circ
this, see reference sheet page entitled "Why People React Differently to Alcohol".

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almost completely lacking in the many other nutrients needed for growth and maintenance

digested slowly, as most other foods must be, before reaching the blood stream.
bed into the blood, passing directly through the walls of the stomach and the small
y carries it to the brain. This is why alcohol may affect a drinker so quickly.

rough the process of oxidation - a series of chemical changes that enables food
n takes place mostly in the liver, which needs about one hour to burn up 1/2 ounce
nt contained in one average highball, one glass of wine, or one can of beer. Mean-
l remains in the blood stream and continues to have an effect on the brain.

ssant, not a stimulant; but sometimes a drinker imagines that he is being pepped up.

on the brain is to slow down the brain area that controls judgement and
may interfere with a person's normal ability to do certain mental tasks:
tand; to reason; to make decisions.
rea, alcohol releases the drinker's inhibitions which usually guard his
less inhibited, more relaxed, he may at first feel unusually free-and-
nervous system is being depressed, not stimulated; and this depressant
e person continues to drink.
slow down the brain area that controls muscular coordination. Thus,
fere with a person's normal ability to do certain physical tasks: to
his arms and legs; to speak clearly; to balance himself.

remendously. Different people react differently to the same amount of alcohol. Even
ifferently to the same amount of alcohol under different circumstances. For more on
age entitled "Why People React Differently to Alcohol".

TEACHER INFORMATION (continued)

Alcohol is higher in calories than sugars and starches, although lower than fats
can contribute to overweight. However, if alcohol is substituted for a balanced
from malnutrition.

Moderate amounts of alcohol usually do not harm body organs in the well-nourish
and high concentration of alcohol may lead to irritation or inflammation of part
prolonged and heavy drinking may seriously affect the heart, liver, stomach, and

If a person rapidly gulps down an unusually large amount of alcohol (more than a

Alcoholic beverages are made from two different processes - fermentation and di
creates beverages containing higher concentrations of Alcohol. Wines and beers a
Liquors are distilled beverages: rum, gin, vodka, brandy, and whiskey (rye, bour

Straight liquor reaches the brain faster because it is absorbed into the blood s
which is diluted. But when liquor is diluted, what you use as a mixer has an i
the alcohol. The carbonation in soda or ginger ale will speed the passage of th
Thus, the alcohol in liquor diluted with water is absorbed most slowly; the alco
soda is absorbed somewhat faster; and the alcohol in straight liquor is absorbe

The flavor of the liquor does not affect the drinker. It's the alcohol content
has a different flavor because each is made from different ingredients. Whiske
corn, barley, rye; vodka from corn, other cereals, and potatoes; rum from molas
with juniper berries. But all ordinary liquors have roughly the same alcohol c

Switching, or mixing, won't make you drunker because the degree of drunkenness
amount of alcohol your blood absorbs, not by the flavor of the beverages. Howe
is more likely to cause nausea and vomiting, possibly because of the different

Nothing can speed the sobering-up process because your body oxidizes alcohol a
help keep you awake, but it won't improve your judgement or sharpen your reacti
can only wait for his liver to burn up the alcohol, at the rate of about one ho
alcohol he has drunk.

Under certain circumstances, one drink may affect a driver's judgement, may in
ness, especially if he is an inexperienced driver or an inexperienced drinker.

TEACHER INFORMATION (continued)

calories than sugars and starches, although lower than fats. The calories in alcohol rweight. However, if alcohol is substituted for a balanced diet, the person may suffer

lcohol usually do not harm body organs in the well-nourished person. But large amounts n of alcohol may lead to irritation or inflammation of parts of the digestive system; rinking may seriously affect the heart, liver, stomach, and other organs.

ulps down an unusually large amount of alcohol (more than a pint), it may kill him.

re made from two different processes - fermentation and distillation. Distillation taining higher concentrations of Alcohol. Wines and beers are fermented beverages. beverages: rum, gin, vodka, brandy, and whiskey (rye, bourbon, Scotch).

es the brain faster because it is absorbed into the blood stream faster than liquor t when liquor is diluted, what you use as a mixer has an influence on absorption of rbonation in soda or ginger ale will speed the passage of the alcohol through the stomach. liquor diluted with water is absorbed most slowly; the alcohol in liquor diluted with ewhat faster; and the alcohol in straight liquor is absorbed fastest of all.

quor does not affect the drinker. It's the alcohol content that affects him. Each liquor or because each is made from different ingredients. Whiskey is made from grain such as odka from corn, other cereals, and potatoes; rum from molasses; gin from alcohol flavored . But all ordinary liquors have roughly the same alcohol content.

, won't make you drunker because the degree of drunkenness is determined by the total ur blood absorbs, not by the flavor of the beverages. However, for some people switching use nausea and vomiting, possibly because of the different flavoring and mixers used.

e sobering-up process because your body oxidizes alcohol at a steady rate. Coffee can , but it won't improve your judgement or sharpen your reactions. A person who is drunk s liver to burn up the alcohol, at the rate of about one hour for every 1/2 ounce of .

nstances, one drink may affect a driver's judgement, may interfere with his normal alert- f he is an inexperienced driver or an inexperienced drinker.

Drunkenness is temporary loss of control over one's reactions and behavior, while dri
drinks immoderately at one time or another may become drunk.

Alcoholism is a serious illness. The alcoholic loses control of his drinking. He is
his drinking interferes with some vital part of his life - his work, his family, his
health. He may feel that drinking offers him not only escape, but actually the only
life.

Out of about 80 million people of the United States who use alcohol, 4 to 5 million a
The person who drinks to escape from his emotional problems and the pressures of every
more likely to become an alcoholic.

These signs may be warnings: The person's drinking increases, especially his drinking
to drink, or drink on the sly, or need to drink early in the morning. He may gulp dr
"black out." (This is temporary loss of memory, not loss of consciousness.)

At this point, a person may be treated effectively if he consults his physician or mi
psychologist, or psychiatrist. Without treatment, he faces uncontrolled drinking, fr
addiction to alcohol.

TEACHER INFORMATION (continued)

ss of control over one's reactions and behavior, while drinking alcohol. Anyone who time or another may become drunk.

ness. The alcoholic loses control of his drinking. He is dependent on alcohol; and h some vital part of his life - his work, his family, his emotional or physical rinking offers him not only escape, but actually the only satisfaction he can find in

ple of the United States who use alcohol, 4 to 5 million are estimated to be alcoholics. cape from his emotional problems and the pressures of everyday living is probably coholic.

s: The person's drinking increases, especially his drinking alone. He may seek excuses ly, or need to drink early in the morning. He may gulp drink after drink. He may porary loss of memory, not loss of consciousness.)

y be treated effectively if he consults his physician or minister, or a counselor, ist. Without treatment, he faces uncontrolled drinking, frequent drunkenness, and

TEACHER INFORMATION (continued)

SOME POSSIBLE CAUSES OF ALCOHOLISM

(from: Teaching About Alcohol, Frances Todd,
McGraw-Hill Book Company, 1964, pp. 122-123)

Research in this field can be conveniently grouped under three headings: physiolog
sociological.

A. Physiological

I. One experimenter describes the basic cause of alcoholism as a congenit
characterized by the unusual food needs of some individuals for vitami
by ordinary foods in their everyday diet. According to the researcher
supplement will cause the craving for alcohol to be suppressed.

II. Some researchers suggest that alcoholics lose salt and water at a high
the resultant low blood chloride level triggers an abnormal craving fo

III. Another researcher blames the alcoholic's compulsion to drink on a met
from excessive drinking in which the cells in the brain as well as in
function more efficiently in the presence of alcohol.

IV. Endocrinologists advance the theory that malfunction of the pituitary
involved. When the blood sugar level is low because of sluggish gland
tensions and anxieties mount. Alcohol temporarily raises the blood su
relief. The ensuing letdown is painful, but may be relieved rapidly b

B. Psychological. Research in this area tests the hypothesis that alcoholic
emotions.

I. Proponents indicate that the use of alcohol can lead to alcoholism onl
or emotional disabilities.

II. Among personality abnormalities linked with alcoholism are oral influe
homosexuality, a need to dominate, a feeling of inferiority, insecurit
infancy.

TEACHER INFORMATION (continued)

SOME POSSIBLE CAUSES OF ALCOHOLISM

(from: Teaching About Alcohol, Frances Todd,
McGraw-Hill Book Company, 1964, pp. 122-123)

ı be conveniently grouped under three headings: physiological psychological, and

ıter describes the basic cause of alcoholism as a congenital nutritional peculiarity
ı by the unusual food needs of some individuals for vitamins - needs that are not met
foods in their everyday diet. According to the researcher, an adequate vitamin
ill cause the craving for alcohol to be suppressed.

hers suggest that alcoholics lose salt and water at a higher rate than is normal and
t low blood chloride level triggers an abnormal craving for alcohol.

archer blames the alcoholic's compulsion to drink on a metabolic disturbance resulting
ve drinking in which the cells in the brain as well as in other parts of the body
e efficiently in the presence of alcohol.

ists advance the theory that malfunction of the pituitary and adrenal glands may be
hen the blood sugar level is low because of sluggish glandular functioning, emotional
anxieties mount. Alcohol temporarily raises the blood sugar level and thus gives
ensuing letdown is painful, but may be relieved rapidly by drinking more alcohol.

Research in this area tests the hypothesis that alcoholics drink to relieve painful

ndicate that the use of alcohol can lead to alcoholism only among people with mental
disabilities.

ality abnormalities linked with alcoholism are oral influences of childhood and
y, a need to dominate, a feeling of inferiority, insecurity and lack of love during

C. Sociological. It is now generally agreed that alcoholism probably results
some of which may be physiological, some of which may be psychological, an
twined in the social context in which they operate.

TEACHER INFORMATION (continued)

generally agreed that alcoholism probably results from a group of factors, siological, some of which may be psychological, and all of which are inter- text in which they operate.

TEACHER INFORMATION (conti

SOME SOCIAL AND PSYCHOLOGICAL PROBLEMS WHICH ARE NO

(from: Alcohol Education for Classro
and Community, Raymond McCarthy, Ed

1. Alcohol does not create social problems. Such problems arise out of
of a society.

2. Deviant behavior is not caused by alcohol. All behavior is learned i
the characteristics of that context, deviant or non-deviant behavior

3. Pathological personality disturbances are not caused by alcohol. All
of relationships with other members of the society and, depending on
those personalities can or cannot adapt to changes in the social syst
person in the social system, his flexibility or inflexibility will pe
tinuing comfortable functioning.

4. The mere use of alcohol does not constitute a problem. Alcohol is us
is integrated with other social patterns and because it performs a fu
for society as a whole.

5. Society's definition of the use of alcohol as a problem arises not f
behavior which accompanies its use, but (a) from the culture's value
between the excessive use of alcohol and the individual's effective
and (c) from the inefficiency of social controls.

6. Society's reaction toward the excessive use of alcohol may contribut
and to socially disapproved behavior depending on the individual's a

7. The social definition of individuals or their behavior as problems d
available to the scientist who wishes to take an objective view of t

TEACHER INFORMATION (continued)

SOME SOCIAL AND PSYCHOLOGICAL PROBLEMS WHICH ARE NOT CAUSED BY ALCOHOL

(from: Alcohol Education for Classroom
and Community, Raymond McCarthy, Ed.)

ot create social problems. Such problems arise out of the continuing social processes

or is not caused by alcohol. All behavior is learned in a social context, depending on
istics of that context, deviant or non-deviant behavior will be the outcome.

ersonality disturbances are not caused by alcohol. All personalities emerge as a result
ips with other members of the society and, depending on the nature of their relationships,
lities can or cannot adapt to changes in the social system. Depending on the place of the
social system, his flexibility or inflexibility will permit or mitigate against his con-
rtable functioning.

of alcohol does not constitute a problem. Alcohol is used in our society because its use
with other social patterns and because it performs a function both for the individual and
s a whole.

inition of the use of alcohol as a problem arises not from alcohol per se or from the
h accompanies its use, but (a) from the culture's value system; (b) from the incompatibility
xcessive use of alcohol and the individual's effective participation in social institutions;
the inefficiency of social controls.

ction toward the excessive use of alcohol may contribute to pathologic personality problems
ly disapproved behavior depending on the individual's adaptation to this societal reaction.

finition of individuals or their behavior as problems determines the kind of data which is
the scientist who wishes to take an objective view of the situation.

TEACHER INFORMATION (continued)

INDIVIDUAL TREATMENT FOR ALCOHOLISM

(from: Alcohol Education for Classroom
and Community, Raymond G. McCarthy, Ed.)

MEDICAL THERAPY - Most significant has been the appearance of ataractic drugs (tranquilizer
These drugs decrease the physical and mental symptoms and permit the pati
difficult symptoms and enter into therapy easily.

Insulin has been used as a mood elevator and increaser of appetite in alc

Antabuse is a well-studied drug usually used in conjunction with other th
patient has taken antabuse tablets, the imbibing of alcohol produces a se
response - flushing of the skin, gasping for breath, and even, in some, a
It effectively prevents the alcoholic from impulsively taking a drink, si
the daily dose of Antabuse for from 3 to 7 days before he can safely drin
therapists consider Antabuse an important drug in the treatment of alcoho

PSYCHIATRIC TREATMENT - Much of the difficulty in the psychiatric treatment of alcoholism s
tendency of alcoholics to break treatment. Early in treatment, the psych
decide on therapeutic goals which are within the capabilities of the pat
decide whether the sick individual can best benefit from relationship th
supportive therapy, or from insight psychotherapy.

In relationship therapy, the alcoholic is interviewed briefly on a numbe
and experiences the stable and continuing interest of another individual
problems. No exploration of unconscious material is attempted.

Supportive treatment involves making use of general principles during th
to bolster the patient emotionally but avoids exploration of the unconsc

Insight psychotherapy is designed to assist the alcoholic to achieve emo
standing of his underlying conflicts. This requires extensive explorati
scious level.

SOCIAL CASEWORK - The psychiatric social worker helps the alcoholic to deal with the many
problems which are a consequence of his excessive drinking. More import
can help other family members to relieve the environmental pressures whi
alcoholic to resume drinking. The worker may fulfill a counseling role,
vision of a psychiatrist, may handle patients in relationship or support

INDIVIDUAL TREATMENT FOR ALCOHOLISM

(from: Alcohol Education for Classroom and Community, Raymond G. McCarthy, Ed.)

significant has been the appearance of ataractic drugs (tranquilizers) on the medical scene. drugs decrease the physical and mental symptoms and permit the patient to overcome cult symptoms and enter into therapy easily.

in has been used as a mood elevator and increaser of appetite in alcoholism.

use is a well-studied drug usually used in conjunction with other therapy. After the nt has taken antabuse tablets, the imbibing of alcohol produces a serious physical nse - flushing of the skin, gasping for breath, and even, in some, a state of shock. fectively prevents the alcoholic from impulsively taking a drink, since he must omit aily dose of Antabuse for from 3 to 7 days before he can safely drink again. Most pists consider Antabuse an important drug in the treatment of alcoholism.

Much of the difficulty in the psychiatric treatment of alcoholism stems from the ency of alcoholics to break treatment. Early in treatment, the psychiatrists should le on therapeutic goals which are within the capabilities of the patient. He must le whether the sick individual can best benefit from relationship therapy, from ortive therapy, or from insight psychotherapy.

elationship therapy, the alcoholic is interviewed briefly on a number of occasions experiences the stable and continuing interest of another individual in him and his lems. No exploration of unconscious material is attempted.

ortive treatment involves making use of general principles during the interviews olster the patient emotionally but avoids exploration of the unconscious.

ght psychotherapy is designed to assist the alcoholic to achieve emotional understanding of his underlying conflicts. This requires extensive exploration at the unconscious level.

psychiatric social worker helps the alcoholic to deal with the many personal, and social lems which are a consequence of his excessive drinking. More important, the caseworker help other family members to relieve the environmental pressures which often cause the holic to resume drinking. The worker may fulfill a counseling role, or under the supervision of a psychiatrist, may handle patients in relationship or supportive psychotherapy.

TEACHER INFORMATION (continued)

ALCOHOLICS ANONYMOUS - Alcoholics Anonymous, or A.A., as it is more commonly called,
alcoholics in order to achieve sobriety. Beginning in Akron, Ohio,
two members, A.A. in 1962 had over 189,700 members in 10,070 group
Canada, and overseas. If nonreported members are included, the tot

A.A.'s basic philosophy is spiritual. Its operational framework i
Twelve Steps and Twelve Traditions. (See Student Ditto, page 167).
main goals in common with professional workers. They try to help
selves, and they make clear one fundamental theme: The alcoholic
in a controlled fashion.

TEACHER INFORMATION (continued)

oholics Anonymous, or A.A., as it is more commonly called, is a banding together of
cs in order to achieve sobriety. Beginning in Akron, Ohio, on June 10, 1935, with
ers, A.A. in 1962 had over 189,700 members in 10,070 groups in the United States,
and overseas. If nonreported members are included, the total approximates 300,000.

asic philosophy is spiritual. Its operational framework is described in its
teps and Twelve Traditions. (See Student Ditto, page 167). A.A. groups have two
ls in common with professional workers. They try to help alcoholics help them-
and they make clear one fundamental theme: The alcoholic can never drink again
trolled fashion.

TEACHER INFORMATION (continued)

A SUMMARY OF TREATMENT FOR THE ALCOHOLIC

(from: Alcohol Education for Classroom
and Community, Raymond G. McCarthy, Ed.)

THE OUTPATIENT CLINIC - Such clinics usually are staffed by part-time psychiatrist
by psychologists, and by full-time social workers. Usually the
for a period of months. Most frequently the clinics are locate
many are operated independently of other health facilities.

GENERAL HOSPITALS - These are the most appropriate agencies to treat acutely and c
Because of their diversity of facilities, all the alcoholic's ma
for in one locale without breaking the relationship between ther
about whether to segregate or integrate the alcoholic into hospi
readmit him, and the financial loss attendant on his admission a
general hospital administrators who express willingness to help

ALCOHOLICS IN MENTAL HOSPITALS - Mental hospitals have been resistant toward the a
unless he suffers chronic mental or behavioral complications in
has resulted in physicians admitting alcoholics to mental hospit
Most alcoholics do not willingly accept mental hospitalization t
element of their illness, and consider such hospitalization pun

SPECIALIZED HOSPITALS - Some communities have special alcoholic hospitals under g
Although limited in number and size, these specialized hospital
concern and skills, often serve as clinical research and traini
have an influence greater than their size.

HALFWAY HOUSES - As the name implies, the halfway house bridges the gap between h
everyday life by being a [illegible] institution for people w
responsibility for themselves. In general, all the houses are
outside employment is encouraged or required, the residents din
of a therapeutic community is considered an essential tool.

SALVATION ARMY AND MISSIONS - Until the development, during the decade 1935-1944,
governmental alcoholism programs, and committees on alcoholism,
programs for alcoholics were primarily the responsibility of th
sponsored missions. For almost a century they represented the
itative force in existence, and their programs are still high
of the total rehabilitative milieu.

TEACHER INFORMATION (continued)

A SUMMARY OF TREATMENT FOR THE ALCOHOLIC

(from: Alcohol Education for Classroom and Community, Raymond G. McCarthy, Ed.)

uch clinics usually are staffed by part-time psychiatrists and physicians, occasionally hologists, and by full-time social workers. Usually the patient is seen one hour a week eriod of months. Most frequently the clinics are located in general hospitals, although e operated independently of other health facilities.

are the most appropriate agencies to treat acutely and chronically ill alcoholics. of their diversity of facilities, all the alcoholic's many physical needs can be cared one locale without breaking the relationship between therapist and patient. Confusion hether to segregate or integrate the alcoholic into hospital services, how often to him, and the financial loss attendant on his admission are a few of the problems facing hospital administrators who express willingness to help the alcoholic.

ITALS - Mental hospitals have been resistant toward the admission of the alcoholic patient he suffers chronic mental or behavioral complications in addition to his alcoholism. This sulted in physicians admitting alcoholics to mental hospitals under psychiatric diagnosis. lcoholics do not willingly accept mental hospitalization thereby denying the psychological of their illness, and consider such hospitalization punitive.

Some communities have special alcoholic hospitals under governmental or private auspices. gh limited in number and size, these specialized hospitals, by virtue of their special n and skills, often serve as clinical research and training centers in alcoholism and thus n influence greater than their size.

name implies, the halfway house bridges the gap between hospital care and the demands of ay life by being a semicustodial institution for people who are not yet able to take full sibility for themselves. In general, all the houses are small, sobriety is required, e employment is encouraged or required, the residents dine and live in, and the maintenance herapeutic community is considered an essential tool.

ONS - Until the development, during the decade 1935-1944, of Alcoholics Anonymous, mental alcoholism programs, and committees on alcoholism, large-scale organized treatment ms for alcoholics were primarily the responsibility of the Salvation Army and various church- red missions. For almost a century they represented the only major nonpunitive rehabil- ve force in existence, and their programs are still highly valued as an important part total rehabilitative milieu.

TEACHER INFORMATION (continued)

PRE-TEST ON ALCOHOLISM

To be given before study of this unit is begun. Ditto sheets for students titled "An Alcoholic Father" accompany this test. The "Fact Sheet" may be utilized following completion of the unit to correct or modify the students' present answers.

AN ALCOHOLIC FATHER (Teaching About Alcohol, Frances Todd, pp. 152-154)

Father frequently goes on drinking sprees, some of which last for several days or e
is not drinking he is kind, lovable, and generous to a fault. But when he drinks t
destructive, and sometimes violent. He often spends so much on liquor that the fam
out necessities.

There are many ways this problem might be handled by the wife and/or older child.
below which you believe might be helpful, and be prepared to defend your choices du
which will follow.

1. Hide the liquor or pour it down the sink.

2. When father is sober, make appeals such as, "If you loved your family you woul
often," or "We can't get Junior's teeth straightened because you spend so much
or "The reason you can't keep a job is that you drink too much."

3. When father is intoxicated, make appeals similar to those cited in 2.

4. Try to procure some substance that can secretly be added to his food so that h
if he takes a drink.

5. Ask the police to lock him up when he is intoxicated.

6. Persuade him to see the family doctor or the health service where he works abo
problem.

7. Threaten him that you will leave home unless he attends meetings of Alcoholics
regularly.

8. Persuade him to talk over his drinking problem with a priest or minister.

TEACHER INFORMATION (continued)

PRE-TEST ON ALCOHOLISM

To be given before study of this unit is begun. Ditto sheets for students titled "An Alcoholic Father" accompany this test. The "Fact Sheet" may be utilized following completion of the unit to correct or modify the students' present answers.

ching About Alcohol, Frances Todd, pp. 152-154)

oes on drinking sprees, some of which last for several days or even weeks. When he
is kind, lovable, and generous to a fault. But when he drinks too much he is mean,
metimes violent. He often spends so much on liquor that the family has to do with-

this problem might be handled by the wife and/or older child. Check those listed
ieve might be helpful, and be prepared to defend your choices during the discussion

or pour it down the sink.

sober, make appeals such as, "If you loved your family you wouldn't get so drunk so
can't get Junior's teeth straightened because you spend so much money on liquor,"
you can't keep a job is that you drink too much."

intoxicated, make appeals similar to those cited in 2.

some substance that can secretly be added to his food so that he will become ill
rink.

to lock him up when he is intoxicated.

see the family doctor or the health service where he works about his drinking

at you will leave home unless he attends meetings of Alcoholics Anonymous

talk over his drinking problem with a priest or minister.

TEACHER INFORMATION (continued)

9. Meet him right after work on payday and take all or almost all of his wages so he cannot spen so much on liquor.

10. Tell him he could stop drinking if he used his will power.

The plan most likely to be helpful is number____.

The plan least likely to be helpful is number ___.

FACT SHEET

(To accompany AN ALCOHOLIC FATHER)

1. Alcoholics will procure liquor somehow because their drinking is a matte choice. Removing or hiding the liquor supply will not deter drinking fo matters by forcing the alcoholic to steal or hide liquor.

2. Such appeals do no good and may do harm. If the father could stop drink intensifies guilt to forget these feelings.

3. Because reason is affected by the action of alcohol on the brain, your w

4. Substances which produce aversion to alcohol should be used only under c Even then, aversion therapy is only a temporary expedient. The underly which causes excessive drinking must be reckoned with in order to achie

5. Jail may prevent his harming himself or others while he is intoxicated, recurrence.

6. Medical doctors can aid an alcoholic by treating nutritional deficienci reflex therapies, and by various psychiatric and psychological techniqu

7. AA has aided millions of alcoholics, but neither AA nor anything else c want to be helped. Threats, particularly those not carried out, are in

8. Pastoral counseling has helped many alcoholics, particularly those who, were interested in religious or spiritual activities.

9. This scheme may make it possible to pay some of the family's bills, but from drinking. The compulsive nature of his drinking is so severe that write bad checks to buy liquor. Police estimate that 75 per cent of al order to purchase alcohol.

10. An alcoholic is a sick person. Alcoholism cannot be controlled by wil can. The alcoholic needs professional assistance to develop "won't po entirely.

TEACHER INFORMATION (continued)

FACT SHEET

(To accompany AN ALCOHOLIC FATHER)

ocure liquor somehow because their drinking is a matter of compulsion rather than
or hiding the liquor supply will not deter drinking for long and may even complicate
the alcoholic to steal or hide liquor.

good and may do harm. If the father could stop drinking he probably would. Nagging
to forget these feelings.

affected by the action of alcohol on the brain, your words would fall on deaf ears.

roduce aversion to alcohol should be used only under careful medical supervision.
n therapy is only a temporary expedient. The underlying personality disorder
sive drinking must be reckoned with in order to achieve any lasting results.

is harming himself or others while he is intoxicated, but it is unlikely to prevent

n aid an alcoholic by treating nutritional deficiencies, by aversion and conditioned-
and by various psychiatric and psychological techniques.

ions of alcoholics, but neither AA nor anything else can help a patient who does not
Threats, particularly those not carried out, are ineffective.

ng has helped many alcoholics, particularly those who, before they became alcoholics,
religious or spiritual activities.

ake it possible to pay some of the family's bills, but it will not keep an alcoholic
e compulsive nature of his drinking is so severe that he will borrow money or even
to buy liquor. Police estimate that 75 per cent of all bad checks are passed in
alcohol.

sick person. Alcoholism cannot be controlled by will power any more than cancer
ic needs professional assistance to develop "won't power" to give up drinking

TEACHER INFORMATION (continued)

SOME STATISTICS ON ALCOHOL AND CRIME

(from: Alcohol Education for Classroom
and Community, Raymond G. McCarthy, Editor, pp. 169-170)

1. More alcoholics and excessive drinkers are arrested than are moderate drinkers, and individuall they are arrested more often. Across the country, the police spend approximately 75 per cent c their time handling people who have been drinking excessively. As a general rule, being drunk is in itself the offense with which these persons are charged. A sizeable proportion of those who are arrested for being drunk have frequently been arrested for being drunk, often several times in the same year.

2. Alcoholics are more likely to be arrested for misdemeanors than for felonies.

3. In prison populations composed of those committed for felonies, between 24 and 40 percent had histories of excessive drinking and between 8 and 24 per cent were inebriated at the time they were apprehended. Eighty to ninety percent of the inmates blamed their incarceration on alcoh

4. Alcoholics and inebriated persons are more likely to be involved in crimes against individuals than against property. They are more likely to act as individuals than as members of organize criminal groups. The crime is more likely to be impulsive than planned.

5. The crimes of women alcoholics are different from those of women nonalcoholics only in that there is a preponderance of illegal sexual behavior. There has been no study of the relationship between crime and drinking of a non alcoholic type among women.

6. Imprisoned alcoholics tend to be older than imprisoned nonalcoholics.

7. Between 30 and 40 per cent of persons chronically arrested for drunkenness have histories of earlier criminal careers.

TEACHER INFORMATION (continued)

THE SOCIAL CHARACTERISTICS OF TEENAGE USERS

Age: The probability that a teenager will be a user of alcoholic beverages incr
age is also related to the increased probability that the drinker will dri
experience some physiological effects from drinking such as inebriety.

At age 18, the usual age for graduation from high school, the extensivenes
drinking is at its peak for the teenager. Drinking is one identifying mar

Sex: Research has shown:

A. Males in our society are more likely than females to drink. Also male
quently and more intensively, and more compulsively than females.

B. Among teenagers, females were more likely than males to report being
in the home.

C. Females, among teenagers, were less likely than males to claim parent
outside the home and less likely than males to drink "hard liquor" an
dramatic effects from drinking as inebriety.

D. Both male and female teenagers verbalized a double standard of propri
drinking during a study in Michigan (between 1953-1956)

Religion: Religious preferences and participation in organized religion among teen
reported in the research. However, studies indicate that religious ident
tion in organized religion are not interpreted by teenagers as precluding

Socio-Economic Status: Popularly, categories of individuals who have or are thoug
identification as a result of similar socio-economic status have been cal
designations as "upper", "middle", and "lower" have been demonstrated as
of very complex social processes and arrangements.

However, such designations have attracted attention to the possibility th
life are associated with the various socio-economic positions and that dr
with style of life.

TEACHER INFORMATION (continued)

THE SOCIAL CHARACTERISTICS OF TEENAGE USERS

a teenager will be a user of alcoholic beverages increases with age. Increasing
o the increased probability that the drinker will drink intensively and will
ological effects from drinking such as inebriety.

age for graduation from high school, the extensiveness and intensiveness of
ak for the teenager. Drinking is one identifying mark of the adult.

ety are more likely than females to drink. Also males tend to drink more fre-
intensively, and more compulsively than females.

females were more likely than males to report being exposed to drinking first

enagers, were less likely than males to claim parental permission to drink
and less likely than males to drink "hard liquor" and to experience such
from drinking as inebriety.

ale teenagers verbalized a double standard of propriety with regard to teenage
study in Michigan (between 1953-1956)

s and participation in organized religion among teenagers are not uniformly
rch. However, studies indicate that religious identification and participa-
igion are not interpreted by teenagers as precluding the use of alcohol.

rly, categories of individuals who have or are thought to have a common
esult of similar socio-economic status have been called "classes". Such
r", "middle", and "lower" have been demonstrated as gross oversimplications
l processes and arrangements.

tions have attracted attention to the possibility that different styles of
ith the various socio-economic positions and that drinking behavior may vary

TEACHER INFORMATION (continued)

It is suggestive from some of the research that the probability of teenage d
economic status. It is further suggested that teenage users of alcohol were
in the upper and lower third of the range of status while non-users were mos
middle range. In addition, among females in the studies made, users were mo
to be found in the lower range of status.

Rural-Urban Residence: Recent surveys have pointed out that there are definite diffe
in urban and rural areas.

Urban adults have been found more likely than rural adults to drink and to d
general, drinking was found to be more common in urban than in rural areas a

TEACHER INFORMATION (continued)

e of the research that the probability of teenage drinking increases with socio-
urther suggested that teenage users of alcohol were most likely to be found
ird of the range of status while non-users were most likely to be found in the
n, among females in the studies made, users were more likely than non-users
range of status.

veys have pointed out that there are definite differences in drinking behavior

und more likely than rural adults to drink and to drink compulsively. In
nd to be more common in urban than in rural areas among teenagers also.

TEACHER INFORMATION (continued)

ADOLESCENTS AND ALCOHOL

A Summary of research completed from 1948 to
1963 regarding what adolescents in our society
are thinking about alcohol and doing with it.
(Alcohol Education for Classroom and Community,
Raymond G. McCarthy, Editor, pp. 35-37)

1. The personal use of alcohol is not typically a childhood experience in this soci personal use tends to occur about the thirteenth or fourteenth year, that is, at entrance into high school. Some tasting may have occurred before this time.

2. The probability is quite high that every adolescent in our society will have use beverage at least once before being graduated from high school. The establishme patterns of alcohol consumption does not necessarily follow such experimentatio

3. There is marked variation from community to community in the proportion of adole "users" of beverage alcohol, that is to say, those for whom drinking has not bee single isolated experience to religious situations only.

4. The first personal use of alcohol is typically reported to be in the home, with relatives present.

5. Adolescents who drink typically report that at least one parent is a user.

6. The proportion of drinking adolescents who claim parental approval is greatest confine their drinking to the home.

7. Among adolescents, as among adults, the probability that an individual will be such social factors as sex, age, socio-economic position, ethnic and religious rural or urban residence.

   The probability that the adolescent will be a user increases with age. The use to be male than a female; at the extremes of socio-economic status rather than range; a Jew or Catholic rather than a Protestant; and living in an urban rathe

TEACHER INFORMATION (continued)

ADOLESCENTS AND ALCOHOL

A Summary of research completed from 1948 to
1963 regarding what adolescents in our society
are thinking about alcohol and doing with it.
(Alcohol Education for Classroom and Community,
Raymond G. McCarthy, Editor, pp. 35-37)

ohol is not typically a childhood experience in this society. The first
ccur about the thirteenth or fourteenth year, that is, at puberty or upon
ol. Some tasting may have occurred before this time.

e high that every adolescent in our society will have used an alcoholic
before being graduated from high school. The establishment of regular
sumption does not necessarily follow such experimentation.

on from community to community in the proportion of adolescents who are
ohol, that is to say, those for whom drinking has not been confined to a
nce to religious situations only.

of alcohol is typically reported to be in the home, with parents or other

ypically report that at least one parent is a user.

ing adolescents who claim parental approval is greatest among those who
to the home.

mong adults, the probability that an individual will be a user varies with
sex, age, socio-economic position, ethnic and religious background, and
e.

e adolescent will be a user increases with age. The user is more likely
e; at the extremes of socio-economic status rather than in the middle
c rather than a Protestant; and living in an urban rather than a rural area.

TEACHER INFORMATION (continued)

8. Adolescents typically associate the use of alcohol with adult role-playi those situations in which adults are being convivial, celebrating a spe from tensions and anxiety.

9. The probability that an adolescent will be a user of beverage alcohol i graduation from high school, i.e. as he assumes adult-like roles and re

10. Adolescents tend to perceive alcohol as a social beverage rather than a in their description of drinking and its consequences, what alcohol doe it does to the drinker.

11. The prevalence of drinking among adolescents in a community is not demo restraints specifically designed to prevent or discourage drinking amon

12. Only a minority of adolescents, even when they themselves are abstinent among adults or among their age peers, to be morally wrong under all ci

13. The incidence of problem drinking among adolescents appears to be low. beverages are typically those with low alcohol content.

14. Adolescent attitudes toward, and use of, beverage alcohol are oriented are imitations of, adult attitudes and behavior.

15. There is little evidence based on carefully controlled investigation to ifications in adolescent attitudes toward, or use of, beverage alcohol

TEACHER INFORMATION (continued)

associate the use of alcohol with adult role-playing and particularly with
hich adults are being convivial, celebrating a special event, or seeking relief
iety.

an adolescent will be a user of beverage alcohol increases as he approaches
school, i.e. as he assumes adult-like roles and responsibilities.

erceive alcohol as a social beverage rather than as a drug; they tend to emphasize,
of drinking and its consequences, what alcohol does for the drinker rather than what
r.

nking among adolescents in a community is not demonstrably dependent on the legal
ly designed to prevent or discourage drinking among minors.

olescents, even when they themselves are abstinent, consider drinking, either
their age peers, to be morally wrong under all circumstances.

lem drinking among adolescents appears to be low. The most commonly used
ly those with low alcohol content.

toward, and use of, beverage alcohol are oriented toward, and to a large extent
lult attitudes and behavior.

nce based on carefully controlled investigation to indicate significant mod-
ent attitudes toward, or use of, beverage alcohol since 1953.

XIII. GLOSSARY

absorption	the process of taking in and incorporating into the c
abstention	a doing without
alcoholic content	the amount of alcohol in a given substance
Alcoholics Anonymous	a loosely knit, voluntary fellowship of alcoholics ga purpose of helping themselves and each other to get s
alcoholism	a serious disease caused by a number of factors both
ataractic drugs (tranquilizers)	drugs which decrease the physical and mental symptoms to overcome difficult symptoms and enter into therapy
blackout	also known as alcoholic palimpsests, this is a form o or episode or stretch of activity following the consu
chlordiazepoxide (Librium)	a psychotroptic drug used in treating alcoholics. Re anxiety, and tensions.
cirrhosis of the liver	a serious disorder characterized by a permanent shrin degeneration of the liver tissues. Its prevalence is than in the general population
delirium tremens	a frequently fatal disease incurred by about 5 per ce symptoms are frightening hallucinations, some of whic
depressant	a substance which lowers the rate of muscular or nerv
distillation	the process of first heating a mixture to separate th volatile parts and then cooling and condensing the re a more nearly pure or refined substance.
disulfiram (Antabuse)	drug used in treating alcoholics. Reactions include severe flushing; extreme nausea; vomiting; palpitati labored breathing; blurred vision.

XIII. GLOSSARY

rocess of taking in and incorporating into the cells

ng without

mount of alcohol in a given substance

sely knit, voluntary fellowship of alcoholics gathered together for the sole
se of helping themselves and each other to get sober and stay sober

rious disease caused by a number of factors both physical and psychological

which decrease the physical and mental symptoms and permit the alcoholic
vercome difficult symptoms and enter into therapy easily

known as alcoholic palimpsests, this is a form of amnesia for a single event
pisode or stretch of activity following the consumption of alcohol

ychotroptic drug used in treating alcoholics. Relieves fears, inhibitions,
ety, and tensions.

rious disorder characterized by a permanent shrinking, hardening, and fatty
neration of the liver tissues. Its prevalence is higher among heavy drinkers
in the general population

equently fatal disease incurred by about 5 per cent of all alcoholics. The
toms are frightening hallucinations, some of which may lead to physical injury.

bstance which lowers the rate of muscular or nervous activity

process of first heating a mixture to separate the more volatile from the less
tile parts and then cooling and condensing the resulting vapor so as to produce
re nearly pure or refined substance.

used in treating alcoholics. Reactions include intense, throbbing headache;
ere flushing; extreme nausea; vomiting; palpitations; fall in blood pressure;
ored breathing; blurred vision.

GLOSSARY (continued)

drunkenness	- a temporary loss of control over one's reactions and behavior Anyone can get drunk, but not everyone will become an alcoholi
fermentation	- breakdown and change of molecules in a substance due to a ferm
halfway house	- institution which bridges the gap between hospital care and th life
intoxication	- state of being intoxicated, inebriated or drunk
malnutrition	- undernourishment resulting from insufficient food or improper
narcotic	- a drug (alcohol is one) which in moderate doses allays sensibi and produces profound sleep, but in poisonous doses produces s
outpatient clinic	- clinic usually staffed by part-time psychiatrists and physicia psychologists, and by full-time social workers. The alcoholic week for a period of months.
psychotherapy	- mental treatment using suggestion, psycho-analysis, or re-educ
stimulant	- a substance that increases the action of a body part; stimulan wakefulness, and alertness.

GLOSSARY (continued)

orary loss of control over one's reactions and behavior while drinking alcohol.
can get drunk, but not everyone will become an alcoholic.

own and change of molecules in a substance due to a ferment such as a bacteria

ution which bridges the gap between hospital care and the demands of everyday

of being intoxicated, inebriated or drunk

ourishment resulting from insufficient food or improper diet

(alcohol is one) which in moderate doses allays sensibility, relieves pain,
roduces profound sleep, but in poisonous doses produces stupor, coma or convulsions.

usually staffed by part-time psychiatrists and physicians, occasionally by
ologists, and by full-time social workers. The alcoholic is seen one hour a
for a period of months.

treatment using suggestion, psycho-analysis, or re-education

stance that increases the action of a body part; stimulants produce excitation,
ulness, and alertness.

CULMINATING ACTIVITIES

Plan a "mock trial" to be presented to the student body or to the P.T.A.

Have a debate between two classes on an issue of interest to the student.

Written critique of the unit by the students and suggestions for improvements

Have the class put on a "quiz program" covering information on drugs.

Invite an enforcement officer to talk about the local scene.

Invite an expert (pharmacist, medical doctor, psychiatrist, social worker, ju
Alcoholics Anonymous) to discuss the problems of abuse.

Select a panel of students and have each student discuss a phase of the alcoh
the viewpoint of the: traffic officer, juvenile court judge, athletic coach,
judge, wife and a child.

Have a discussion by three or four students on what an adolescent can do in a

CULMINATING ACTIVITIES

presented to the student body or to the P.T.A.

classes on an issue of interest to the student.

it by the students and suggestions for improvements.

uiz program" covering information on drugs.

cer to talk about the local scene.

ist, medical doctor, psychiatrist, social worker, juvenile court judge, officer of
iscuss the problems of abuse.

s and have each student discuss a phase of the alcohol, tobacco, and drug problem from
ffic officer, juvenile court judge, athletic coach, employment counselor, divorce court

e or four students on what an adolescent can do in a home where there is an abuse problem.

EVALUATION

KNOWLEDGE

Have the objectives set forth at the beginning of the unit been fulfilled?

Do the students know the physical and psychological effects of drugs?

Do the students understand the legal aspects of drug abuse?

Do the students understand rehabilitation of drug abusers?

Have the students been made aware of the history of drugs and abuse?

Have the students been involved in situations and issues of concern to them?

Have the students learned enough of the facts about alcohol, tobacco and drugs wise decisions about their use?

Have the students been presented with material at their ability level?

Have the students been stimulated to seek all the facts and weigh the consequen decisions?

EVALUATION

KNOWLEDGE

orth at the beginning of the unit been fulfilled?

physical and psychological effects of drugs?

l the legal aspects of drug abuse?

l rehabilitation of drug abusers?

le aware of the history of drugs and abuse?

volved in situations and issues of concern to them?

enough of the facts about alcohol, tobacco and drugs to enable them to make
r use?

esented with material at their ability level?

imulated to seek all the facts and weigh the consequences before making their

EVALUATION (continued)

SKILLS

Has the student developed or improved communication with peers and adults?

Has the student developed research methods?

Has the student learned to cooperate and work with others on group projects?

Can the student remember what he has seen and heard?

Has the student learned critical discrimination of material? Can he discriminate between truth and half truth?

Has the student learned how to find information?

EVALUATION (continued)

ATTITUDES

Has the student:

Become better able to accept and face responsibility?

Gained an understanding of individual responsibility to himself and the group?

Become a better, more useful member of society?

Gained self respect and independence?

Developed an understanding of and pride in abstinence?

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New York, New York 10017

The Alameda County School Department
Rock La Fleche, Supt of Schools
224 West Winton Avenue
Hayward, California 94544

Americal Medical Association
535 N. Dearborn Street
Chicago, Illinois 60610

General Service Office of Alcoholics Anonymous
305 East 45th Street
New York, New York 10017

Licensed Beverage Industries, Inc.
155 East 44th Street
New York, New York 10017

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Box 212
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4750 Sheridan Road
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New York, New York, 10017

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Greenfield, Mass., 01301

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381 Park Avenue South
New York, New York 10016

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Montana Division
3022 Fourth Avenue North
Billings, Montana, 59101

American Cancer Society
219 East 42nd Street
New York, New York, 10017

American Heart Association
44 East 23rd Street
New York, New York 10010

American Medical Association
535 North Dearborn,
Chicago, Illinois, 60610

Department of Health, Education and Welfare
Public Health Service
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5454 Wisconsin Avenue
Chevy Chase, Maryland, 20203

Montana Heart Association
510 First Avenue North
Great Falls, Montana, 59401

National Cancer Institute
United States Public Health Service
Bethesda, Maryland, 20014

National Clearinghouse for Smoking and Health
Webb Building, Room 812
4040 North Fairfax Drive
Arlington, Virginia, 22203

National Interagency Council on Smoking and Health
P.O. Box 3654
Central Station
Arlington, Virginia, 22203

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1790 Broadway
New York, New York 10019

Montana Tuberculosis Association
825 Helena Avenue
Helena, Montana, 59601

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